



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

NFIRS-1 Basic

A

62210	MN	01	10	2024	Station #14 (14)	SPFD240110001619	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Location Type

Census tract: 0335.00

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

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

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

Cross Street

<p>C Incident Type</p> <p>111-Building fire</p>	<p>E1 Dates and Times</p> <p>Alarm 01 10 2024 02:52</p> <p>Arrival 01 10 2024 02:55</p> <p>Controlled [] [] [] []</p> <p>Last Unit Cleared 01 10 2024 15:19</p>	<p>E2 Shifts and Alarms</p> <p>B 2 D1</p> <p>Shift Alarms District or Platoon</p>
	<p>D Aid Given Or Received</p> <p><input type="checkbox"/> 1 Mutual Aid Received <input type="checkbox"/> 2 Auto. Aid Received <input type="checkbox"/> 3 Mutual Aid Given <input type="checkbox"/> 4 Auto. Aid Given <input type="checkbox"/> 5 Other Aid Given <input checked="" type="checkbox"/> None</p> <p>Their FDID: [] [] Their State: [] [] Their Incident Number: [] [] [] []</p>	<p>E3 Special Studies</p> <p>9244 3 - No, COVID 19 was not a factor</p> <p>ID# Value</p>

<p>F Actions Taken</p> <p>11-Extinguishment by fire service personnel</p> <p>Primary Action Taken</p> <p>21-Search</p> <p>Additional Action Taken</p>	<p>G1 Resources</p> <p><input checked="" type="checkbox"/> Apparatus or Personnel Module is used.</p> <p>Apparatus Personnel</p> <table border="1"> <tr> <td>Suppression</td> <td>5</td> <td>0</td> </tr> <tr> <td>EMS</td> <td>3</td> <td>0</td> </tr> <tr> <td>Other</td> <td>2</td> <td>0</td> </tr> </table> <p><input type="checkbox"/> Resource counts include aid received resources.</p>	Suppression	5	0	EMS	3	0	Other	2	0	<p>G2 Estimated Dollar Losses and Values</p> <p>Losses: Required for all fires if known. Optional for all non-fires. None</p> <p>Property: \$ 463,500.00 <input type="checkbox"/></p> <p>Contents: \$ 150,000.00 <input type="checkbox"/></p> <p>Pre-Incident Values: Optional None</p> <p>Property: \$ 463,500.00 <input type="checkbox"/></p> <p>Contents: \$ 150,000.00 <input type="checkbox"/></p>
Suppression	5	0									
EMS	3	0									
Other	2	0									

Completed Modules <input type="checkbox"/> 2 - Fire <input type="checkbox"/> 3 - Structure Fire <input type="checkbox"/> 4 - Civilian Fire Cas. <input type="checkbox"/> 5 - Fire Service Cas. <input type="checkbox"/> 6 - EMS <input type="checkbox"/> 7 - HazMat <input type="checkbox"/> 8 - Wildland Fire <input type="checkbox"/> 9 - Apparatus <input type="checkbox"/> 10 - Personnel <input type="checkbox"/> 11 - Arson	H1 Casualties <input checked="" type="checkbox"/> None <table border="1"> <tr> <td></td> <td>Deaths</td> <td>Injuries</td> </tr> <tr> <td>Fire Service</td> <td><input type="text" value="0"/></td> <td><input type="text" value="0"/></td> </tr> <tr> <td>Civilian</td> <td><input type="text" value="0"/></td> <td><input type="text" value="0"/></td> </tr> </table>		Deaths	Injuries	Fire Service	<input type="text" value="0"/>	<input type="text" value="0"/>	Civilian	<input type="text" value="0"/>	<input type="text" value="0"/>	H3 Hazardous Materials Release <input type="checkbox"/> 1 - Natural Gas <input type="checkbox"/> 2 - Propane Gas <input type="checkbox"/> 3 - Gasoline <input type="checkbox"/> 4 - Kerosene <input type="checkbox"/> 5 - Diesel Fuel / Fuel Oil <input type="checkbox"/> 6 - Household Solvents <input type="checkbox"/> 7 - Motor Oil <input type="checkbox"/> 8 - Paint <input type="checkbox"/> 0 - Other <input checked="" type="checkbox"/> None	I Mixed Use Property <input type="checkbox"/> Not Mixed <input type="checkbox"/> 10 - Assembly Use <input type="checkbox"/> 20 - Education Use <input type="checkbox"/> 33 - Medical Use <input type="checkbox"/> 40 - Residential Use <input type="checkbox"/> 51 - Row Of Stores <input type="checkbox"/> 53 - Enclosed Mall <input checked="" type="checkbox"/> 58 - Business and Residential <input type="checkbox"/> 59 - Office Use <input type="checkbox"/> 60 - Industrial Use <input type="checkbox"/> 63 - Military Use <input type="checkbox"/> 65 - Farm Use <input type="checkbox"/> 00 - Other Mixed Use
		Deaths	Injuries									
Fire Service	<input type="text" value="0"/>	<input type="text" value="0"/>										
Civilian	<input type="text" value="0"/>	<input type="text" value="0"/>										
H2 Detector Required For Confined Fires <input type="checkbox"/> 1 - Detector Alerted Occupants <input type="checkbox"/> 2 - Detector Did Not Alert Them <input type="checkbox"/> 3 - Unknown												

J Property Use None

131 <input type="checkbox"/> Church, Place of Worship 161 <input type="checkbox"/> Restaurant or Cafeteria 162 <input type="checkbox"/> Bar/Tavern or Nightclub 213 <input type="checkbox"/> Elementary School, Kindergarten 215 <input type="checkbox"/> High School, Junior High 241 <input type="checkbox"/> College, Adult Education 311 <input type="checkbox"/> Nursing Home 331 <input type="checkbox"/> Hospital	341 <input type="checkbox"/> Clinic, Clinic-Type Infirmary 342 <input type="checkbox"/> Doctor/Dentist Office 361 <input type="checkbox"/> Prison or Jail, Not Juvenile 419 <input type="checkbox"/> 1- or 2-Family Dwelling 429 <input checked="" type="checkbox"/> MultiFamily Dwelling 439 <input type="checkbox"/> Rooming/Boarding House 449 <input type="checkbox"/> Commerical Hotel or Motel 459 <input type="checkbox"/> Residential, Board and Care 464 <input type="checkbox"/> Dormitory/Barracks 519 <input type="checkbox"/> Food and Beverage Sales	539 <input type="checkbox"/> Household Goods, Sales, Repairs 571 <input type="checkbox"/> Gas or Service Station 579 <input type="checkbox"/> Motor Vehicle/Boat Sales/Repairs 599 <input type="checkbox"/> Business Office 615 <input type="checkbox"/> Electric-Generating Plant 629 <input type="checkbox"/> Laboratory/Science Laboratory 700 <input type="checkbox"/> Manufacturing Plant 819 <input type="checkbox"/> Livestock/Poultry Storage (Barn) 882 <input type="checkbox"/> Non-Residential Parking Garage 891 <input type="checkbox"/> Warehouse
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Outside

124 <input type="checkbox"/> Playground or Park 655 <input type="checkbox"/> Crops or Orchard 669 <input type="checkbox"/> Forest (Timberland) 807 <input type="checkbox"/> Outdoor Storage Area 919 <input type="checkbox"/> Dump or Sanitary Landfill 931 <input type="checkbox"/> Open Land or Field 936 <input type="checkbox"/> Vacant Lot	938 <input type="checkbox"/> Graded/Cared for Plot of Land 946 <input type="checkbox"/> Lake, River, Stream 951 <input type="checkbox"/> Railroad Right-of-Way 960 <input type="checkbox"/> Other Street 961 <input type="checkbox"/> Highway/Divided Highway 962 <input type="checkbox"/> Residential Street/Driveway 981 <input type="checkbox"/> Construction Site 984 <input type="checkbox"/> Industrial Plant Yard	Property Use: <input type="text"/> 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

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Local Option	Person/Entity Type	Business Name (if applicable)	Phone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mr., Ms., Mrs.	First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number	Prefix	Street or Highway	Street Type
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Post Office Box	Apt./Suite/Room	City	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
State	Zip Code		
<input type="text"/>	<input type="text"/>		

L Remarks:

Report of a bean bag fire in an occupant's apartment on the second floor of a business and residential structure. Engine 18's crew was first on scene and in command. Engine 18's crew pulled a hose line for fire attack. Ladder 18's crew performed a search of the 2nd floor. Engine 5's crew pulled a backup hose line.

District Chief 1 arrived and assumed a transfer of command. Visible smoke was showing from the structure. Engine 14's crew assisted Engine 18's FEO with a water supply. Squad 2's crew performed a primary search of the 2nd floor. Engine 18's crew responded that the 2nd floor search was clear. Command updated the fire apparatus response to a "balance of the alarm" for additional fire companies.

Car 50-EMS Coordinator, Car 5-Deputy Chief, and District Chief 2 arrived for support and safety of the scene. Medic 5 and Medic 8 arrived for any medical needs. The occupant was reported to be on the rooftop of the building. Ladder 18 FEO was told to ladder the building.

Engine 8 and Engine 20's crews gained second and third water supplies. Ladder 22's crew was assigned RIT. CAD reports indicated that the structure had multiple areas of fire and was reported extinguished in several areas of the building during initial operations.

Squad 3's crew had a hose line on the Charlie side and reported they had fire showing on the 1st floor a few minutes after arrival. Command called all companies out of the building to regroup after initial fire operations. This building pr...

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

M Authorization

Officer In Charge ID	Signature	Position or Rank	Assignment	Date
1516	Rodriguez, Arthur	DC	C1	01/10/2024
1516	Rodriguez, Arthur	DC	C1	01/10/2024

Member Making Report ID Signature Position or Rank Assignment Date

NFIRS-2 Fire

A	62210	MN	01	10	2024	Station #14 (14)	SPFD240110001619	0
	FDID	State	Month	Day	Year	Station	Number	Exposure

<p>B</p> <p>Property Details</p> <p>B1 <input type="text" value="8"/> <input type="checkbox"/> Not Residential Estimated number of residential living units in the building of origin whether or not all units became involved</p> <p>B2 <input type="text" value="1"/> <input type="checkbox"/> Buildings Not Involved Number of buildings involved</p> <p>B3 <input type="text"/> <input checked="" type="checkbox"/> None <input type="checkbox"/> Less than 1 acre Acres burned (outside fires)</p>	<p>C</p> <p>On-Site Materials Or Products</p> <p>On-Site Materials Storage Use</p>
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<p>D</p> <p>Ignition</p> <p>D1 <input type="text" value="20-Function areas, other"/> Area of Fire Origin</p> <p>D2 <input type="text" value="Undetermined"/> Heat Source</p> <p>D3 <input type="text" value="Undetermined"/> Item First Ignited</p> <p>D4 Type of Material First Ignited</p>	<p>E1</p> <p>Cause of Ignition</p> <p><input type="checkbox"/> 1 - Intentional <input type="checkbox"/> 2 - Unintentional <input type="checkbox"/> 3 - Failure of Equipment or Heat Source <input type="checkbox"/> 4 - Act of Nature <input type="checkbox"/> 5 - Cause Under Investigation <input checked="" type="checkbox"/> U - Cause Undetermined After Investigation</p> <p>E2</p> <p>Factors Contributing to Ignition</p> <p><input type="text" value="Undetermined"/> Factor Contributing to Ignition</p>	<p>E3</p> <p>Human Factors Contributing to Ignition</p> <p>Check all applicable boxes</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> 1 - Asleep <input type="checkbox"/> 2 - Possibly impaired by alcohol or drugs <input type="checkbox"/> 3 - Unattended person <input type="checkbox"/> 4 - Possibly Mentally Disabled <input type="checkbox"/> 5 - Physically Disabled <input type="checkbox"/> 6 - Multiple Persons Involved</p> <hr/> <p><input type="checkbox"/> 7 - Age Was A Factor</p> <p>Estimated Age of Person Involved <input type="text"/></p> <p><input type="checkbox"/> Male <input type="checkbox"/> Female</p>
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<p>F1</p> <p>Equipment Involved In Ignition</p> <p><input checked="" type="checkbox"/></p> <p><input type="text"/></p> <p>Equipment Involved</p> <p>Brand <input type="text"/></p> <p>Model <input type="text"/></p> <p>Serial # <input type="text"/></p> <p>Year <input type="text"/></p>	<p>F2</p> <p>Equipment Power Source</p> <p><input checked="" type="checkbox"/></p> <p><input type="text"/></p> <p>Equipment Power Source</p> <p>F3</p> <p>Equipment Portability</p> <p><input type="checkbox"/> 1 - Portable <input type="checkbox"/> 2 - Stationary Portable equipment normally can be moved by one or two persons.</p>	<p>G</p> <p>Fire Suppression Factors</p>
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<p>H1</p> <p>Mobile Property Involved</p> <p><input type="checkbox"/> 1 - Not involved in ignition, but burned <input type="checkbox"/> 2 - Involved in ignition, but did not burn <input type="checkbox"/> 3 - Involved in ignition and burned <input checked="" type="checkbox"/> None</p>	<p>H2</p> <p>Mobile Property Type and Make</p> <p><input type="text"/></p> <p>Mobile Property Type</p> <p><input type="text"/></p> <p>Mobile Property Make</p>	<p>Local Use</p> <p><input type="checkbox"/> Pre-Fire Plan Available <input type="checkbox"/> Arson Report Attached <input type="checkbox"/> Police Report Attached <input type="checkbox"/> Coroner Report Attached <input type="checkbox"/> Other Reports Attached</p>
<p><input type="text"/></p> <p>Mobile Property Model</p> <p><input type="text"/></p> <p>State</p>	<p><input type="text"/></p> <p>Year</p> <p><input type="text"/></p> <p>License Plate Number</p> <p><input type="text"/></p> <p>VIN</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

NFIRS-3 Structure Fire

<p>I1</p> <p>Structure Type</p> <p><input checked="" type="checkbox"/> 1 - Enclosed Building</p> <p><input type="checkbox"/> 2 - Portable/Mobile Structure</p> <p><input type="checkbox"/> 3 - Open Structure</p> <p><input type="checkbox"/> 4 - Air-Supported Structure</p> <p><input type="checkbox"/> 5 - Tent</p> <p><input type="checkbox"/> 6 - Open Platform</p> <p><input type="checkbox"/> 7 - Underground Structure</p> <p><input type="checkbox"/> 8 - Connective Structure</p> <p><input type="checkbox"/> 0 - Other</p>	<p>I2</p> <p>Building Status</p> <p><input type="checkbox"/> 1 - Under Construction</p> <p><input type="checkbox"/> 2 - In Normal Use</p> <p><input type="checkbox"/> 3 - Idle, Not Routinely Used</p> <p><input type="checkbox"/> 4 - Under Major Renovation</p> <p><input type="checkbox"/> 5 - Vacant and Secured</p> <p><input type="checkbox"/> 6 - Vacant and Unsecured</p> <p><input type="checkbox"/> 7 - Being Demolished</p> <p><input checked="" type="checkbox"/> 0 - Other</p> <p><input type="checkbox"/> U - Undetermined</p>	<p>I3</p> <p>Building Height</p> <p style="text-align: center;"> 3 </p> <p>Number of Stories At/Above Grade</p> <p style="text-align: center;"> 1 </p> <p>Number of Stories Below Grade</p>	<p>I4</p> <p>Main Floor Size</p> <p style="text-align: center;"> </p> <p>Total Square Feet</p> <p style="text-align: center;">OR</p> <p style="text-align: center;"> 150 BY 40 </p> <p>Length (ft) X Width (ft)</p>
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<p>J1</p> <p>Fire Origin</p> <p style="text-align: center;"> 1 <input type="checkbox"/> Below Grade</p> <p>Story of Fire Origin</p>	<p>J3</p> <p>Number of Stories Damaged By Flame</p> <p> Number of Stories w/Minor Damage (1-24%)</p> <p> Number of Stories w/Significant Damage (25-49%)</p> <p> Number of Stories w/Heavy Damage (50-74%)</p> <p> Number of Stories w/Extreme Damage (75-100%)</p> <p style="text-align: center;">*Count the roof as part of the highest story</p>	<p>K</p> <p>Type of Material Contributing Most to Flame Spread</p> <p>K1 </p> <p>Item Contributing Most to Flame Spread</p> <p>K2 </p> <p>Type of Material Contributing Most To Flame Spread</p>
<p>J2</p> <p>Fire Spread</p> <p><input type="checkbox"/> Confined to Object of Origin</p> <p><input type="checkbox"/> 2 - Confined to Room of Origin</p> <p><input type="checkbox"/> 3 - Confined to Floor of Origin</p> <p><input checked="" type="checkbox"/> 4 - Confined to Building of Origin</p> <p><input type="checkbox"/> 5 - Beyond Building of Origin</p>		

<p>L1</p> <p>Presence of Detectors</p> <p><input type="checkbox"/> N - None Present</p> <p><input type="checkbox"/> 1 - Present</p> <p><input checked="" type="checkbox"/> U - Undetermined</p>	<p>L3</p> <p>Detector Power Supply</p> <p><input type="checkbox"/> 1 - Battery Only</p> <p><input type="checkbox"/> 2 - Hardwire Only</p> <p><input type="checkbox"/> 3 - Plug-In</p> <p><input type="checkbox"/> 4 - Hardwire With Battery</p> <p><input type="checkbox"/> 5 - Plug-In With Battery</p> <p><input type="checkbox"/> 6 - Mechanical</p> <p><input type="checkbox"/> 7 - Multiple Detectors & Power Supplies</p> <p><input type="checkbox"/> 0 - Other</p> <p><input type="checkbox"/> U - Undetermined</p>	<p>L5</p> <p>Detector Effectiveness</p> <p><input type="checkbox"/> 1 - Alerted Occupants, Occupants Responded</p> <p><input type="checkbox"/> 2 - Alerted Occupants, Occupants Failed to Respond</p> <p><input type="checkbox"/> 3 - There Were No Occupants</p> <p><input type="checkbox"/> 4 - Failed to Alert Occupants</p> <p><input type="checkbox"/> U - Undetermined</p>
<p>L2</p> <p>Detector Type</p> <p><input type="checkbox"/> 1 - Smoke</p> <p><input type="checkbox"/> 2 - Heat</p> <p><input type="checkbox"/> 3 - Combination of Smoke and Heat</p> <p><input type="checkbox"/> 4 - Sprinkler, Water Flow Detection</p> <p><input type="checkbox"/> 5 - More Than One Type Present</p> <p><input type="checkbox"/> 0 - Other</p> <p><input type="checkbox"/> U - Undetermined</p>	<p>L4</p> <p>Detector Operation</p> <p><input type="checkbox"/> 1 - Fire Too Small To Activate</p> <p><input type="checkbox"/> 2 - Operated</p> <p><input type="checkbox"/> 3 - Failed To Operate</p> <p><input type="checkbox"/> U - Undetermined</p>	<p>L6</p> <p>Detector Failure Reason</p> <p><input type="checkbox"/> 1 - Power Failure, Shutoff, or Disconnect</p> <p><input type="checkbox"/> 2 - Improper Installation or Placement</p> <p><input type="checkbox"/> 3 - Defective</p> <p><input type="checkbox"/> 4 - Lack of Maintenance, Dirty</p> <p><input type="checkbox"/> 5 - Battery Missing or Disconnected</p> <p><input type="checkbox"/> 6 - Battery Discharged or Dead</p> <p><input type="checkbox"/> 0 - Other</p> <p><input type="checkbox"/> U - Undetermined</p>

<p>M1</p> <p>Presence of Automatic Extinguishing System</p> <p><input checked="" type="checkbox"/> N - None Present</p> <p><input type="checkbox"/> 1 - Present</p> <p><input type="checkbox"/> 2 - Partial System Present</p> <p><input type="checkbox"/> U - Undetermined</p>	<p>M3</p> <p>Operation of Automatic Extinguishing System</p> <p><input type="checkbox"/> 1 - Operated/Effective</p> <p><input type="checkbox"/> 2 - Operated/Not Effective</p> <p><input type="checkbox"/> 3 - Fire Too Small To Activate</p> <p><input type="checkbox"/> 4 - Failed To Operate</p> <p><input type="checkbox"/> 0 - Other</p> <p><input type="checkbox"/> U - Undetermined</p> <p>Required if fire was within designed range</p>	<p>M5</p> <p>Reason for Automatic Extinguishing System Failure</p> <p><input type="checkbox"/> 1 - System Shut Off</p> <p><input type="checkbox"/> 2 - Not Enough Agent Discharged</p> <p><input type="checkbox"/> 3 - Agent Discharged But Did Not Reach Fire</p> <p><input type="checkbox"/> 4 - Wrong Type of System</p> <p><input type="checkbox"/> 5 - Fire Not In Area Protected</p> <p><input type="checkbox"/> 6 - System Components Damaged</p> <p><input type="checkbox"/> 7 - Lack of Maintenance</p> <p><input type="checkbox"/> 8 - Manual Intervention</p> <p><input type="checkbox"/> 0 - Other</p> <p><input type="checkbox"/> U - Undetermined</p> <p>Required if system failed or not effective</p>
<p>M2</p> <p>Type of Automatic Extinguishing System</p> <p><input type="checkbox"/> 1 - Wet-Pipe Sprinkler</p> <p><input type="checkbox"/> 2 - Dry-Pipe Sprinkler</p> <p><input type="checkbox"/> 3 - Other Sprinkler System</p> <p><input type="checkbox"/> 4 - Dry Chemical System</p> <p><input type="checkbox"/> 5 - Foam System</p> <p><input type="checkbox"/> 6 - Halogen-Type System</p> <p><input type="checkbox"/> 7 - Carbon Dioxide System</p> <p><input type="checkbox"/> 0 - Other</p> <p><input type="checkbox"/> U - Undetermined</p> <p>Required if fire was within designed range of AES</p>	<p>M4</p> <p>Number of Sprinkler Heads Operating</p> <p style="text-align: center;"> </p> <p>Required if system operated</p>	

NFIRS-1S Supplemental

A

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Primary Narrative:

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Squad 3's crew had a hose line on the Charlie side and reported they had fire showing on the 1st floor a few minutes after arrival. Command called all companies out of the building to regroup after initial fire operations. This building proved to have different areas of fire.

Engine 18, Ladder 18, Squad 2, and Squad 3 were given orders to recon and find out what actions were needed for fire suppression. Ladder 18's crew ventilated the Alpha side of the structure to aid recon. This was done to relieve heat and smoke. A primary search was given an all-clear status in the basement by Engine 18's crew, with the fire out.

Squad 3's crew replied shortly after that the first floor was soft and it was recommended that all fire personnel get off the first floor. Command called everyone off the first floor and soon after an evacuation of the structure was ordered due to new fire areas. A RIT call was activated, three fire personnel were missing. Shortly after, the three fire personnel were verified to have been found outside of the building, having self-extricated.

Defensive operations were setup by Ladder 18, Ladder 22, and Engine 18 at the corners of the building. Engine 5 was moved from the hazard zone. Hand lines were put into place to aid suppression. Xcel, DSI, and Car20-Interim Fire Investigator Tweed arrived for support of the scene and cause determination. At this time of this report crews were mopping up hot spots.

Addendum: District Chief 2 C-Shift arrived on scene and was briefed by University Command regarding the details of the incident. University Command was transferred to District Chief 2 C-Shift.

The bulk of the fire was knocked down upon transfer of Command. Ladder 19's crew was called to the scene to replace Ladder 22's crew on the Charlie Delta side of the structure. Engine 8 supplied Ladder 22 with water and Engine 20 was placed on the Alpha/Delta corner of the structure.

All other fire companies were placed back in service. DSI and structural engineers determined the building to be structurally unsound and called for a contractor to assist with tear down of the structure.

Building owners were contacted and made aware of the situation. All utilities to the main fire building as well as the Bravo 1 exposure were secured.

Contractors on site began systematic tear down of the structure while fire crews assisted with putting out hot spots in the debris. Fire crews were on site until approximately 1430 hours. The scene was turned over to DSI.