

Saint Paul Fire Department

FIRE INCIDENT DISPOSITION



INCIDENT NUMBER:	19-42418	DATE OF INCIDENT: 11-3-2019																					
TIME OF INCIDENT:	2208 Hours	POLICE CASE #: n/a																					
INVESTIGATOR(s) :	Blank, J																						
INCIDENT ADDRESS:	181 Front Ave Saint Paul, MN 55117																						
OCCUPANT NAME:	Kari L Pientka	PHONE: 651-279-6991																					
OWNER NAME:	Tamla K Crockett/Derick Crockett	PHONE: Unknown																					
ADDRESS OF OWNER:	3549 Minnehaha Ave S Minneapolis, MN 55406																						
PROPERTY DAMAGED:	Single Family Dwelling	AREA OF ORIGIN: East Wall of Basement Bedroom.																					
DAMAGE ESTIMATE:	Building \$10,100	Vehicle \$n/a	Other (Describe) \$n/a																				
VALUE:	Building \$10,100	Vehicle \$n/a	Other (Describe) \$n/a																				
Damage Estimate CONTENTS ONLY:	\$5,000																						
INJURY/DEATH (if yes, explain)	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes One adult female transported for minor smoke inhalation.																						
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 checked="" 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 checked="" 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 report of a house fire with someone stuck in the house. Firefighters arrived to find a basement fire and the rescued occupant outside in the rear yard. The victim's husband admitted to Car #5 that his wife was smoking in the basement on the couch and then discovered a couch fire and attempted to put it out with water. Examination revealed several burned and discarded cigarette butts in the area of origin underneath and on top of the couch. The ignition source was a cigarette. The first fuel ignited was a couch. The action that brought these items together was due to improper disposal of smoking materials. The classification of fire cause is accidental. This was an illegal bedroom and the rental unit had high piles of garbage stored in a staircase. A Form #4 will be completed for appropriate follow up by DSI.</p>																						
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