



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

NFIRS-1 Basic

A

62210	MN	06	16	2024	Station #18 (18)	SPFD240616028906	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Location Type

Census tract:
0312.00

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

981		ST ALBANS	ST-Street	N-North
Number	Prefix	Street or Highway	Street Type	Suffix

102	Saint Paul	MN	55103
Apt./Suite/Room	City	State	Zip Code

Cross Street

C

Incident Type

113-Cooking fire, confined to container

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	06	16	2024	19:54
Arrival	06	16	2024	19:58
Controlled				
Last Unit Cleared	06	16	2024	20:28

E2

Shifts and Alarms

B	1	D2
Shift or Platoon	Alarms	District

E3

Special Studies

9244	4 - Unknown
ID#	Value

F Actions Taken 51-Ventilate Primary Action Taken 63-Restore fire alarm system Additional Action Taken 52-Forcible entry 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; padding: 2px; text-align: center;">1</td> <td style="padding: 2px; text-align: center;">0</td> </tr> <tr> <td style="border-right: 1px solid black; padding: 2px;">EMS</td> <td style="border-right: 1px solid black; padding: 2px; text-align: center;">2</td> <td style="padding: 2px; 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; padding: 2px; text-align: center;">1</td> <td style="padding: 2px; text-align: center;">0</td> </tr> </table> ☐ Resource counts include aid received resources.	Suppression	1	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 <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Property:</td> <td style="width: 20%;">\$ </td> <td style="width: 20%; text-align: center;">☒</td> </tr> <tr> <td>Contents:</td> <td>\$ </td> <td style="text-align: center;">☒</td> </tr> </table> Pre-Incident Values: Optional None <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Property:</td> <td style="width: 20%;">\$ </td> <td style="width: 20%; text-align: center;">☒</td> </tr> <tr> <td>Contents:</td> <td>\$ </td> <td style="text-align: center;">☒</td> </tr> </table>	Property:	\$	☒	Contents:	\$	☒	Property:	\$	☒	Contents:	\$	☒
Suppression	1	0																					
EMS	2	0																					
Other	1	0																					
Property:	\$	☒																					
Contents:	\$	☒																					
Property:	\$	☒																					
Contents:	\$	☒																					

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, 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:

Fire crews were called for a possible apartment fire. Ladder 18's crew and Engine 18's crew determined there was smoke from unattended cooking, and no fire. Crews ventilated the apartment and reset the alarm. Board-up was contacted to secure the interior apartment door due to inoperable lock from forced entry.

No further actions were necessary; all crews returned to service. Car20-Fire Investigator on scene but no further cause determination investigation needed.

M Authorization

4804

Wolfsberger, John

DC

C2

06/16/2024

Officer In Charge ID

Signature

Position or Rank

Assignment

Date

4804

Wolfsberger, John

DC

C2

06/16/2024

Member Making Report ID

Signature

Position or Rank

Assignment

Date

NFIRS-2 Fire

A

62210	MN	06	16	2024	Station #18 (18)	SPFD240616028906	0
FDID	State	Month	Day	Year	Station	Number	Exposure

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

Area of Fire Origin

D2

Heat Source

D3

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

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

☒

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

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

Year

State

License Plate Number

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 Number of Stories At/Above Grade Number of Stories Below Grade	I4 Main Floor Size Total Square Feet OR BY Length (ft) X Width (ft)
---	--	--	--

J1 Fire Origin ☐ 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	