



City of Broken Arrow
Meeting Agenda
Nuisance Abatement Public Hearing

Council Chambers
220 S 1st Street
Broken Arrow OK
74012

Wednesday, April 2, 2025

12:00 PM

Council Chambers

1. Call To Order

2. Approval of Previous Minutes

- A. [25-401](#) Approval of Nuisance Abatement Public Hearing Minutes of May 3, 2023

3. Nuisance Abatements for Consideration

- A. [25-411](#) Consideration, discussion and possible declaration that 222 West Detroit Street, Broken Arrow, Oklahoma, 74012; Lots 13 thru 16 Block 20 Broken Arrow-Original Town, Tulsa County; as a dilapidated structure and a public nuisance and authorization to demolish the property. Violations: Title 11 O.S. § 22-111 and § 22-112; City Nuisance Code 15-1 C.15 and 15-4 and 15-1 D.10 a & b
- B. [25-415](#) Consideration, discussion and possible declaration that 21410 East 38th Street, Broken Arrow, OK 74012; Wagoner County Swan Lake Addition to Sunrise Estates Lot 1, Blk 3 Wagoner County; as a dilapidated structure and a public nuisance and authorization to demolish the property

4. Continued Business-NONE

5. Appeals-NONE

6. Adjournment

NOTICE:

If you are a person with a disability and need some accommodation in order to participate in this meeting, please contact the City Clerk at 918-259-2400 ext 5418 to make arrangements.

Post this _____ day of _____, _____ at _____ am/pm

City Clerk



City of Broken Arrow

Request for Action

File #: 25-401, **Version:** 1

**Nuisance Abatement Public Hearing
Meeting of: 04-02-25**

Title: Approval of Nuisance Abatement Public Hearing Minutes of May 3, 2023

Background: Minutes recorded for the Nuisance Abatement Public Hearing.

Cost: N/A

Funding Source: N/A

Prepared By: April Dampf, Community Development

Reviewed By: Community Development
Legal Department

Approved By: Joe Williford, Chief Building Inspector

Attachments: May 3, 2023, Nuisance Abatement Public Hearing Minutes

Recommendation: Approve the Minutes of May 3, 2023, for the Nuisance Abatement Public Hearing.



City of Broken Arrow
Minutes - Draft
Nuisance Abatement Public Hearing

Council Chambers
220 S 1st Street
Broken Arrow OK
74012

Wednesday, May 3, 2023

12:00 PM

Council Chambers

1. Call To Order

Hearing Officer Norman Stephens called the Nuisance Abatement Public Hearing to Order.

2. Approval of Previous Minutes

A. [23-555](#) Approval of Nuisance Abatement Public Hearing Minutes of April 5, 2023

The minutes are approved.

3. Nuisance Abatements for Consideration

A. [23-413](#) Consideration, discussion and possible declaration that 2000 West Louisville Street, Broken Arrow, Oklahoma, 74012; Lot 5 Block 3, Wedgewood III Addition, Tulsa County; as a dilapidated structure and a public nuisance and authorization to demolish the property. Violations: Title 11 O.S. § 22-111 and § 22-112; City Nuisance Code 15-1 C.15 and 15-4 and 15-1 D.10 a & b.

Code Enforcement Officer Valerie Holbrook advised a case was opened by Code Enforcement for a dilapidated structure on August 18, 2022. A courtesy notice was mailed to the property address. On August 26, 2022, the property was re-inspected and the inspection showed the property to still be in a severely dilapidated state, a total loss due to a fire. An Order to Correct and Repair was posted on the property and mailed certified to the property owner. The property owner contacted Code Enforcement to advise of a lawsuit with her insurance company. In March, Code Enforcement was advised the insurance settled and the house would be sold as is. There has been no change to the property. The mortgage company advised they were unable to remediate.

Hearing Officer Norman Stephens said, "This property, is it currently in as bad condition as what we are seeing?"

Code Enforcement Officer Valerie Holbrook said, yes, it is a total loss and it is an attractive nuisance. They have boarded it as best as they can given the nature of the fire. There is a privacy fence which somewhat secures the back, but it has suffered the same damage. I have been in contact with the property

owner several times and unfortunately there does not seem to be any movement. I was told the property would be put on the market and that has not happened. We have had neighbors who tried to reach out wanting to purchase the property and there has not been any movement in that direction either. So, right now we are at a stand still and meanwhile this property is in this very dilapidated state.

Recommendation: Declare the structure located at 2000 West Louisville Street, Broken Arrow, Oklahoma, a dilapidated structure and a public nuisance and execute the demolition order.

Hearing Officer Norman Stephens asked three (3) times if there was anyone here representing the owner of the property, the mortgage company or the insurance company. With no response, he declared the property located at 2000 West Louisville Street, Broken Arrow, Oklahoma, a dilapidated structure and a public nuisance and authorized it be demolished in accordance with the law. The demolition order was executed.

4. Continued Business

None.

5. Appeals

None.

6. Adjournment

The public hearing adjourned at 12:04:04. Video of this public hearing is available at www.brokenarrowok.gov.

NOTICE:

Administrative Clerk

Date: _____



City of Broken Arrow

Request for Action

File #: 25-411, Version: 1

**Nuisance Abatement Hearing
Meeting of: April 2, 2025**

To: Nuisance Abatement Hearing Officer
From: Community Development

Title: Consideration, discussion and possible declaration that 222 West Detroit Street, Broken Arrow, Oklahoma, 74012; Lots 13 thru 16 Block 20 Broken Arrow-Original Town, Tulsa County; as a dilapidated structure and a public nuisance and authorization to demolish the property. Violations: Title 11 O.S. § 22-111 and § 22-112; City Nuisance Code 15-1 C.15 and 15-4 and 15-1 D.10 a & b

Background:

On July 11, 2024, a case was opened by Code Enforcement for the dilapidated structure (house) and the dilapidated detached garage and storage building located on the property. An inspection showed the house, garage and storage building to be in the following condition, which according to State Statute and City Ordinance meets the definition of a dilapidated structure and eligible for demolition: The garage has wood rot and a dilapidated roof. The storage building is rusted out and is dilapidated. The house has cracks in the foundation, dilapidated siding and wood rot. In addition, a porch has been added to the back end of the house. The porch is in disrepair with rotted, unsealed wood and missing boards and is a safety hazard. A Courtesy Notice was mailed to the property owner on July 11, 2024. An Order to Correct and Repair was posted and mailed certified to the property owner on July 31, 2024. A Public Hearing Notice was posted and mailed certified to the property owner on September 27, 2024. A revised Public Hearing notice was posted and mailed certified on January 30, 2025. Code Enforcement met with the property owner and son numerous times throughout the process and gave extensions to comply. There have been no improvements made to the property and communication with Code Enforcement has ceased.

Cost: \$0
Prepared By: Valerie Holbrook, Code Enforcement Officer
Reviewed By: Community Development
Legal Department
Approved By: Joe Williford, Chief Building Inspector

Attachments: Voluntary Compliance Courtesy Letter
Certified Mail Receipt Order to Correct and Repair
Notice of Public Hearing
Certified Mail Receipt Notice of Public Hearing
Revised Notice of Public Hearing
Certified Mailing Receipt Revised Public Hearing
General Warranty Deed
Legal Treasurer
Legal Assessor
Water Account
Photographs

Recommendation:

Declare the structure, detached garage and storage building located at 222 West Detroit Street, Broken Arrow, OK a dilapidated structure and a public nuisance and execute the demolition order.



City of Broken Arrow
 PO Box 610
 Broken Arrow OK 74013
 Phone: (918) 259-2411 Ext. 5338
 Fax: (918) 258-4998

Courtesy Notice	Case Number: DLAP-021427-2024
	Case Type: Dilapidated/Abandoned Structure(s)
	Date Case Established: 07/11/2024
	Compliance Deadline: 07/18/2024

Owner: Kim Lien Do

Mailing Address

Kim Lien Do
 222 W DETROIT ST
 BROKEN ARROW, OK 74012

The City of Broken Arrow takes pride in the health, safety, welfare and appearance of our community and we are asking for your assistance in this effort. We understand that you may not be aware of the city codes that pertain to the maintenance of your property.

Neighborhood Engagement has been notified of a possible violation(s) on your property located at the below address.

Address

Parcel

222 W DETROIT ST
 BROKEN ARROW, OK 74012

78100841101510

The possible City Code Violation(s) consist of the following:

<p>Violation: 15-1 (c) (15) Dilapidated Structure - Dilapidated Structure Chapter 15 Section 15-1 (c) (15): Any building, wall, fence or other structure that has been damaged by fire, decay or otherwise, and that is so situated as to endanger the safety of the public, or which are otherwise built, erected or maintained in violation of any ordinance or code.</p>
<p>Corrective Action: Rehabilitate or demolish dilapidated structures upon this lot. Permits are required for either rehabilitation and/or demolition. Remove all trash, junk or debris from rehabilitation, demolition or any other activity from this lot.</p>
<p>Compliance Date: 07/18/2024</p>

We are making this contact with you in advance of an on-site investigation to extend the opportunity for you to voluntarily comply with the ordinances by abating the possible violation(s). Every individual's maintenance of their property will contribute to the overall positive appearance of the community.

Please comply with this courtesy notification by the compliance date indicated above.

If you feel you have received this Courtesy Letter in error or have any questions, please contact the Neighborhood Engagement Office at (918) 259-2411, Ext. 5338.

Your compliance is appreciated.

Sincerely,

Holly Todd
 Administrative Clerk



City of Broken Arrow

PO Box 610
Broken Arrow OK 74013
Phone: (918) 259-2411 Ext. 5338
Fax: (918) 258-4998

Case Number: **DLAP-021427-2024**

**Order To
Correct and
Repair**

Case Type: Dilapidated/Abandoned
Structure(s)

Date Case Established: 07/11/2024

Compliance Deadline: **09/02/2024**

Owner: Kim Lien Do

Mailing Address:

Kim Lien Do
222 W DETROIT ST
BROKEN ARROW, OK 74012

Notice of Violation for the following location:

Address:

222 W DETROIT ST
BROKEN ARROW, OK 74012

Parcel:

78100841101510

City of Broken Arrow, Tulsa County, Oklahoma, discloses unlawful violations of the Property Maintenance Code (also known as IPMC) adopted by the City of Broken Arrow, Oklahoma, Section 15-44, Broken Arrow Municipal Ordinances. Below is a list of those violations, together with a statement of the necessary corrective actions you must take to bring the property into compliance with the Code. These corrective actions must be completed by the compliance deadline date indicated above.

Application of other codes: Any repairs or alterations to a structure, or changes of use therein, which are caused directly or indirectly by the enforcement of this code shall be done in accordance with the procedures and provisions of the building, plumbing, electrical, and mechanical codes under the jurisdiction of the City of Broken Arrow, Oklahoma.

Additional Information

Subdivision: Broken Arrow-original Town

Legal Description: LTS 13 THRU 16 BLK 20

Description of Violation:

Violation: 15-1 (c) (15) Dilapidated Structure - Dilapidated Structure

Chapter 15 Section 15-1 (c) (15): Any building, wall, fence or other structure that has been damaged by fire, decay or otherwise, and that is so situated as to endanger the safety of the public, or which are otherwise built, erected or maintained in violation of any ordinance or code.

Corrective Action: Rehabilitate or demolish dilapidated structures upon this lot. Permits are required for either rehabilitation and/or demolition. Remove all trash, junk or debris from rehabilitation, demolition or any other activity from this lot.

Compliance Date: 09/02/2024

The Code further provides:

- 1) Section E.S. 107.6 Transfer of Ownership: It shall be unlawful for the owner of any dwelling unit or structure who has received a compliance order or upon whom a notice of violation has been served to sell, transfer, mortgage, lease, or otherwise dispose of to another until the provisions of the compliance order or notice of violation have been complied with, or until such owner shall first furnish the grantee, transferee, mortgagee, or lessee a true copy of any compliance order or notice of violation issued by the code official and shall furnish to the code official a signed and notarized statement from the grantee, transferee, mortgagee, or lessee, acknowledging the receipt of such compliance order or notice of violation and fully accepting the responsibility without condition for making the corrections or repairs required by such compliance order or notice of violation.
- 2) Section 15-1.B.5 Right to Appeal: An aggrieved person may file an appeal of the code official's decision, notice or order.
- 3) Section 15-1.B.6 Notice of Appeal: The property owner, or aggrieved person, shall have a right of appeal to the Hearing officer where it is alleged there is an error in any notice, order or decision of the Neighborhood Improvement Officer. Such appeal shall be taken by filing written notice of appeal with the City Clerk within ten (10 days) after the notice or order is rendered, specifying the name and mailing address of the Appellant and the grounds thereof.
- 4) Section 106 Violations, Section 106.3 Prosecution of Violation: Any person failing to comply with a notice of violation or order served in accordance with Section 107 shall be deemed guilty of a misdemeanor or civil infraction as determined by the local municipality, and the violation shall be deemed a strict liability offense. If the notice of violation is not complied with, the code official shall institute the appropriate proceeding at law or in equity to restrain, correct or abate such violation, or to require the removal or termination of the unlawful occupancy of the structure in violation of the provisions of this code or of the order or direction made pursuant thereto. Any action taken by the authority having jurisdiction on such premises shall be charged against the real estate upon which the structure is located and shall be a lien upon such real estate.

Sincerely,

Valerie Holbrook
Code Enforcement Officer

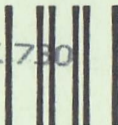


Holbrook, Valerie

USPS TRACKING# OKLAHOMA CITY OK 730



3 AUG 2024 PM 4 L



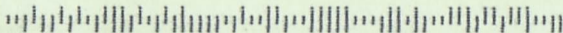
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 8988 4064 3929 44

**United States
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box*

Department of Community Development
City of Broken Arrow
P.O. Box 610
Broken Arrow, OK 74013-0610



10

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

KIM LIEN DO
 222 W DETROIT ST
 BROWN ARROW, OK 74012

VKH (CTCR) DLAP-021427-2024



9590 9402 8988 4064 3929 44

2. Article Number (Transfer from service label)

9589 0710 5270 1218 8093 69

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

KD

 Agent Addressee

B. Received by (Printed Name)

CUIA CY

C. Date of Delivery

8/13

 D. Is delivery address different from item 1? Yes
 No
 If delivery address is different, print delivery address below: No

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

11



City of Broken Arrow
 PO Box 610
 Broken Arrow OK 74013
 Phone: (918) 259-2411 Ext. 5338
 Fax: (918) 258-4998

Case Number: **DLAP-021427-2024**

Nuisance Public Hearing

Case Type: Dilapidated/Abandoned
Structure(s)

Date Case Established: 07/11/2024

Public Hearing Date: **11/06/2024**

Owner: Kim Lien Do

Mailing Address:

Kim Lien Do
 222 W DETROIT ST
 BROKEN ARROW, OK 74012

Notice of Violation for the following location:

Address:

Parcel:

222 W DETROIT ST
 BROKEN ARROW, OK 74012

78100841101510

A recent inspection of the property referenced above revealed the existence of conditions, which if not abated, are considered a public nuisance according to the Oklahoma State Statutes Title 11 O.S. 22-111 and 22-112 and City of Broken Arrow City Code cited below.

Additional Information

Subdivision: Broken Arrow-original Town

Legal Description: LTS 13 THRU 16 BLK 20

Description of Violation:

Violation: 15-1 (c) (15) Dilapidated Structure - Dilapidated Structure
 Chapter 15 Section 15-1 (c) (15): Any building, wall, fence or other structure that has been damaged by fire, decay or otherwise, and that is so situated as to endanger the safety of the public, or which are otherwise built, erected or maintained in violation of any ordinance or code.

Corrective Action: Rehabilitate or demolish dilapidated structures upon this lot. Permits are required for either rehabilitation and/or demolition. Remove all trash, junk or debris from rehabilitation, demolition or any other activity from this lot to include dilapidated garage.

Compliance Date: 10/28/2024

The violations listed above must be abated by the following action:

Rehabilitate or demolish dilapidated structure(s) upon this lot. Permits are required for either rehabilitation or demolition. Remove all trash, junk or debris from rehabilitation, demolition or any other activity from this lot.

You are further notified that the above action(s) must be completed on or before the compliance date indicated above; or in the alternative, you are directed to appear before the Hearing Officer on the hearing date indicated at the top right hand corner of this notice; at 12:00 noon, in the Council Chambers at 220 South First Street, Broken Arrow Oklahoma; to show just cause why the same shall not be abated and that upon your failure to appear the undersigned will take the necessary steps, as directed by City Ordinance, to abate such nuisance(s).

ALL COSTS ASSOCIATED WITH DEMOLITION ABATEMENT WILL BE BILLED TO THE PROPERTY OWNER AND A LIEN MAY BE IMPOSED ON THE PROPERTY TO SECURE PAYMENT

Sincerely,

A handwritten signature in blue ink that reads "Valerie Holbrook". The signature is fluid and cursive, with the first name being more prominent.

Valerie Holbrook
Code Enforcement Officer

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

KIM LIEN DO
222 W DETROIT ST
BROKEN ARROW, OK 74012

VKH (PH) DLAP-021427-2024



9590 9402 8680 3310 3969 35

2. Article Number (Transfer from service label)

9589 0710 5270 2366 1226 69

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

CYR CY

C. Date of Delivery

10/24

- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Mail Restricted Delivery (0)

14

OKLA OK 740

USPS TRACKING#

25 OCT 2024 PM 1 L



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 8680 3310 3969 35

**United States
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box•

Department of Community Development
City of Broken Arrow
P.O. Box 610
Broken Arrow, OK 74013-0610





City of Broken Arrow

PO Box 610
Broken Arrow OK 74013
Phone: (918) 259-2411 Ext. 5338
Fax: (918) 258-4998

Case Number: DLAP-021427-2024	
Nuisance Public Hearing	Case Type: Dilapidated/Abandoned Structure(s)
	Date Case Established: 07/11/2024
	Public Hearing Date: 04/02/2025

Owner: Kim Lien Do

REVISED

Mailing Address:

Kim Lien Do
222 W DETROIT ST
BROKEN ARROW, OK 74012

Notice of Violation for the following location:

Address:

Parcel:

222 W DETROIT ST
BROKEN ARROW, OK 74012

78100841101510

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Corrective Action: Rehabilitate or demolish dilapidated structures upon this lot. Permits are required for either rehabilitation and/or demolition. Remove all trash, junk or debris from rehabilitation, demolition or any other activity from this lot to include dilapidated garage.

Compliance Date: 03/28/2025

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

KIM LIEN DO
 222 W DETROIT ST
 BROKEN ARROW, OK 74012

VKH (RPH) DLAP-021427-2024



9590 9402 8680 3310 3955 94

2. Article Number (Transfer from service label)

9589 0710 5270 2366 1229 73

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

-
- Agent
-
-
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

Service Type

-
- Adult Signature
-
-
- Adult Signature Restricted Delivery
-
-
- Certified Mail®
-
-
- Certified Mail Restricted Delivery
-
-
- Collect on Delivery
-
-
- Collect on Delivery Restricted Delivery
-
-
- Insured Mail

-
- Priority Mail Express®
-
-
- Registered Mail™
-
-
- Registered Mail Restricted Delivery
-
-
- Signature Confirmation™
-
-
- Signature Confirmation Restricted Delivery

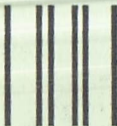
Mail Restricted Delivery (00)

17

USPS TRACKING #



9590 9402 8680 3310 3955 94

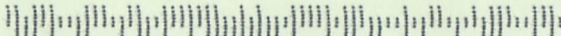


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

Department of Community Development
City of Broken Arrow
P.O. Box 610
Broken Arrow, OK 74013-0610





File No.: 228753

Mailing Address: 222 WEST DETROIT STREET, BROKEN ARROW, OK 74012

Tulsa Abstract
& Title Company
8023 E. 63rd Place
Suite 101
Tulsa, OK 74133
918-250-9080

**GENERAL WARRANTY DEED
(OKLAHOMA STATUTORY FORM)**

THIS INDENTURE, made this 14th day of December, 2009 between **DUANE A. ROSSER AND PATRICIA A. ROSSER, husband and wife**, parties of the first part, hereinafter called party grantor and **KIM LIEN DO**, party of the second part, party grantee.

WITNESSETH: That in consideration of the sum of Ten and NO/100-----(\$10.00)-----dollars receipt of which is hereby acknowledged, said parties grantor do(es), by these presents, grant, bargain, sell and convey unto said party grantee, **her** heirs and assigns, all of the following described real estate, situated in the County of TULSA, State of Oklahoma, to-wit:

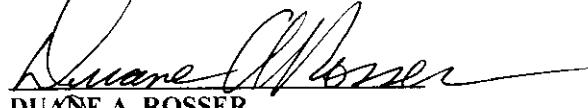
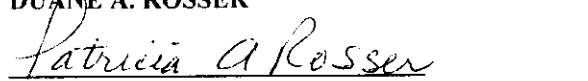
Lots Thirteen (13) to Sixteen (16), Inclusive, Block Twenty (20), ORIGINAL TOWN OF BROKEN ARROW, Tulsa County, State of Oklahoma, according to the Recorded Plat No. B-2.

TO HAVE AND TO HOLD THE SAME, together with all and singular the tenements hereditaments and appurtenances thereto belonging or in any wise appertaining forever.

And said party grantor, their heirs, assigns, executors and administrators do/does hereby covenant, promise and agree to and with said party grantee, at the delivery of these presents that they is/are lawfully seized in their own right of an absolute and indefeasible estate of inheritance in fee simple, of and in all and singular the above granted and described premises, with the appurtenances; that the same is free, clear, and discharged and unencumbered of and from all former and other grants, titles, charges, estates, judgment, taxes, assessments and encumbrances, of whatsoever nature and kind, EXCEPT: Easements and building restrictions of record and special assessments not yet due;

And that party grantor will WARRANT AND FOREVER DEFEND the same unto the said party grantee, her heirs and assigns, against said party grantor, their heirs or assigns and all and every person or persons whomsoever lawfully claiming or to claim the same.

IN WITNESS WHEREOF, the said party grantor, has/have hereunto set their hand/s the day and year above written.


DUANE A. ROSSER

PATRICIA A. ROSSER

STATE OF OKLAHOMA

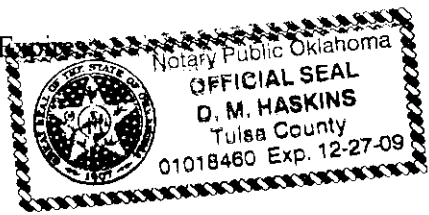
ss. (Acknowledgment)

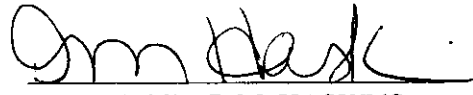
COUNTY OF TULSA

Before me, the undersigned, a Notary Public, in and for said County and State, on this 14th day of December, 2009 personally appeared **DUANE A. ROSSER AND PATRICIA A. ROSSER, husband and wife** to me known to be the identical person/s who executed the within and foregoing instrument, and acknowledged to me that they executed the same as their free and voluntary act and deed for the uses and purposes therein set forth.

IN WITNESS HEREOF, I hereunto set my official signature and affixed my notary seal the day and year last above written.

My Commission Expires
12/27/2009




Notary Public: D.M. HASKINS
Notary Number: 01018460

TULSA ABSTRACT & TITLE CO.
612 S. DENVER AVE.
TULSA, OK 74119

Tax Roll Inquiry

Tulsa County Treasurer

John M. Fothergill, Treasurer
 218 W. 6th St, 8th Floor, Tulsa OK 74119
 Phone: 918-596-5071
 Fax: 918-596-4934
 E-Mail: treasurer@tulsacounty.org



Owner Name and Address

DO, KIM LIEN
 222 W DETROIT ST
 BROKEN ARROW OK 74012-0000

Taxroll Information

Tax Year : 2024
 Property ID : 78100-84-11-01510
 Location : 222 W DETROIT ST N CITY OF BROKEN ARROW
 School District : BA3A Broken Arrow City Mills : 128.81
 Type of Tax : Real Estate
 Tax ID : 1997870

Legal Description and Other Information:

LTS 13 THRU 16 BLK 20 BROKEN ARROW-ORIGINAL TOWN

Assessed Valuations	Amount
Land	2701
Improvements	6436
Net Assessed	9137

The Penalty for this tax statement is calculated through March 15, 2025. After that date, another 1.5% of the base tax will be applied. Fees can be added any time.

Tax Values	Amount
Base Tax	1,177.00
Penalty	35.31

Tax Values

Amount

Fees	0.00
Payments	0.00
Total Paid	0.00
Total Due	1,212.31

Date	Receipt	Paid With	Payment For	Amount	Paid By
No records Found!					

Login (build: 28841:20250305.2)
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General Information

Account Number	R78100841101510
Situs Address	222 W DETROIT ST N BROKEN ARROW 74012
Owner Name	DO, KIM LIEN
Owner Mailing Address	222 W DETROIT ST BROKEN ARROW, OK 74012
Land Area	0.32 acres / 14,000 sq ft
Market Value	\$244,900
Last Year's Taxes	\$1,176.94
Legal Description	Subdivision: BROKEN ARROW-ORIGINAL TOWN (78100)
	Legal: LTS 13 THRU 16 BLK 20
	Section: 11 Township: 18 Range: 14



R78100841101510 (07/2024)

Tax Information

	2023	2024	2025
Fair Cash Value	\$188,441	\$223,263	\$244,900
Taxable Value	\$79,106	\$83,061	\$87,214
Assessment Ratio			
Gross Assessed	\$8,702	\$9,137	\$9,593
Exemptions	\$0	\$0	\$0
Net Assessed	\$8,702	\$9,137	\$9,593
Tax Rate	BA-3A	BA-3A	BA-3A
Tax Rate Mills	128.500000	128.810000	128.810000
Estimated Taxes	\$1,118	\$1,177	\$1,236
Notice of Value Date (if changed from prev yr)	1/31/2023	2/27/2024	1/28/2025

Values

	2023	2024	2025
Land Value	\$66,000	\$66,000	\$66,000
Improvement Value	\$122,441	\$157,263	\$178,900
Fair Cash (Market) Value	\$188,441	\$223,263	\$244,900

Exemptions

	2023	2024	2025
Homestead	-	-	-
Additional Homestead	-	-	-
Senior Valuation Freeze	-	-	-
Veteran	-	-	-

Current Improvements

Tax Year	Property Type	Yr Blt	Livable	Stories	Story Height	Baths	Roof
2025	Residential	1930	1,670 SF	1.00	8	2.00	Composition Shingle
1.00	Slab	Frame Siding/Stucco Veneer			Ranch 1 Story		Cool Air in Heat Ducts

Recent Sales

Sale Date	Grantor	Grantee	Sale Price	Doc Type	Book-Page/Doc #
12/14/2009	ROSSER, DUANE A AND PATRICIA A	DO, KIM LIEN	\$61,500	General Warranty Deed	2009128736
6/27/2007	ROSSER, ROBERT A	ROSSER, DUANE A	\$0	General Warranty Deed	2007071086



John A. Wright - Tulsa County Assessor
Tulsa County Headquarters, 5th Floor | 218 W. 6th St. | Tulsa, Ok 74119
Phone: (918) 596-5100 | Fax: (918) 596-4799 | Email: assessor@tulsacounty.org
Office Hours: 8:00 - 5:00 Monday-Friday (excluding holidays)

Utilities [City of Broken Arrow, OK]

Close | Accept | Search | Browse | Delete | Email | Schedule | Attach | Guide Me Add Account | Guide Me Move Customer | Guide Me Estimate Charges | Pay Fee | Property Master | Account Inquiry | TCM Barcode

Utilities [City of Broken Arrow, OK]

Account

Account *	029070	Start date *	02/09/1990	Stop date *	12/31/9999
Parcel *		Type *	R - R	District *	T1 - T1
Alt parcel *					
Location *	222 W DETROIT ST BROKEN ARROW, OK 740123851	Route *	0205	Read sequence *	158
Prop desc *		Available Units *	0	Occupied Units *	0

Customer ID

Name	Relation	Customer ID	Bill	Bill Address	Start Date	Stop Date
PHAM, PHUONG D	CUSTOMER	251647	Y	222 W DETROIT ST BROKEN ARROW, OK 740123851	03/16/2020	09/07/2023
VACANT	CUSTOMER	999999	Y	CITY OF BROKEN ARROW 220 S 1ST ST BROKEN ARROW, OK	09/08/2023	08/01/2024
PHAM, NHAT D.	CUSTOMER	42380	Y	222 W DETROIT ST BROKEN ARROW, OK 740123851 USA	08/02/2024	12/31/9999







N Birch Ave 300
W Detroit St 300













City of Broken Arrow

Request for Action

File #: 25-415, Version: 1

Nuisance Abatement Hearing

Meeting of: April 2, 2025

To: Nuisance Abatement Hearing Officer

From: Community Development

Title: Consideration, discussion and possible declaration that 21410 East 38th Street, Broken Arrow, OK 74012; Wagoner County Swan Lake Addition to Sunrise Estates Lot 1, Blk 3 Wagoner County; as a dilapidated structure and a public nuisance and authorization to demolish the property

Background:

On February 11, 2025, Code Enforcement opened a case for a dilapidated structure at 21410 East 38th Street. An inspection showed the property to be in the following condition, which according to State Statute and City Ordinance meets the definition of a dilapidated structure and eligible for demolition: The home was destroyed by a large fire on December 17, 2023. The structure is uninhabitable due to the damage from the fire, smoke and water damage. The home appears to be a complete loss with large holes in the roof and exterior walls. There are broken and damaged windows and doors. There is extensive smoke, fire and water damage to the interior portion of the residence as well as the exterior siding, roof and garage and all the windows and doors. The residence is unsecure and has been vandalized on the interior walls.

Cost: \$0

Prepared By: Calvin Scott, Code Enforcement Officer

Reviewed By: Community Development
Legal Department

Approved By: Joe Williford, Chief Building Inspector

Attachments: Voluntary Compliance Courtesy Letter
Fire Investigation Report
Notice of Public Hearing
Certified Mail Receipt Notice of Public Hearing-JPMorgan
Certified Mail Receipt Notice of Public Hearing-JPMorgan
Certified Mail Receipt Notice of Public Hearing-K.R.&F
Certified Mail Receipt Notice of Public Hearing Gueren White unsigned
Legal Treasurer
Photographs
Quit Claim Deed

Recommendation:

File #: 25-415, Version: 1

Declare 21410 East 38th Street, Broken Arrow, OK a dilapidated structure and a public nuisance and execute the demolition order.



City of Broken Arrow
 PO Box 610
 Broken Arrow OK 74013
 Phone: (918) 259-2411 Ext. 5338
 Fax: (918) 258-4998

Courtesy Notice	Case Number: DLAP-022711-2025
	Case Type: Dilapidated/Abandoned Structure(s)
	Date Case Established: 02/11/2025
Compliance Deadline: 02/19/2025	

Owner: GUEREN GEOFFREY HUNTER WHITE

Mailing Address

GUEREN GEOFFREY HUNTER WHITE
 21410 E 38TH ST S
 BROKEN ARROW, OK 74014

The City of Broken Arrow takes pride in the health, safety, welfare and appearance of our community and we are asking for your assistance in this effort. We understand that you may not be aware of the city codes that pertain to the maintenance of your property.

Neighborhood Engagement has been notified of a possible violation(s) on your property located at the below address.

Address	Parcel
21410 E 38TH ST S BROKEN ARROW, OK 74014	730011346

The possible City Code Violation(s) consist of the following:

Violation: 15-1 (c) (15) Dilapidated Structure - Dilapidated Structure Chapter 15 Section 15-1 (c) (15): Any building, wall, fence or other structure that has been damaged by fire, decay or otherwise, and that is so situated as to endanger the safety of the public, or which are otherwise built, erected or maintained in violation of any ordinance or code.
Corrective Action: Rehabilitate or demolish dilapidated structures upon this lot. Permits are required for either rehabilitation and/or demolition. Remove all trash, junk or debris from rehabilitation, demolition or any other activity from this lot.
Compliance Date: 02/19/2025

We are making this contact with you in advance of an on-site investigation to extend the opportunity for you to voluntarily comply with the ordinances by abating the possible violation(s). Every individual's maintenance of their property will contribute to the overall positive appearance of the community.

Please comply with this courtesy notification by the compliance date indicated above.

If you feel you have received this Courtesy Letter in error or have any questions, please contact the Neighborhood Engagement Office at (918) 259-2411, Ext. 5338.

Your compliance is appreciated.

Sincerely,

Calvin Scott
 Code Enforcement Officer

Dampf, April

From: Bell, Debby
Sent: Tuesday, February 25, 2025 1:15 PM
To: Dampf, April
Subject: FW: fire investigation report

On the fire run report that Calvin wanted for 21410 E 38th St and why I could find anything. Per FM Sharp that house is on a curve and sits at both S 214th & E 38th St. the fire run report 2023-15905 of 3745 S 214th St is the correct fire run report you were wanting for 21410 E 38th St. there was also an arson investigation, but nothing could be proved.

Debs

From: Sharp, Justin <jsharp@brokenarrowok.gov>
Sent: Tuesday, February 25, 2025 12:45 PM
To: Bell, Debby <DBell@BrokenArrowOK.Gov>
Subject: RE: fire investigation report

Debby,

Its going to be 3745 South 214th East Avenue. NFIRS 2023-15905.

From: Bell, Debby <DBell@BrokenArrowOK.Gov>
Sent: Tuesday, February 25, 2025 12:40 PM
To: Sharp, Justin <jsharp@brokenarrowok.gov>
Subject: fire investigation report

You were correct the fire was 12/2023
21410 E 38th St

I'm still not able to find a fire run report, but if there is a fire Investigation report should there not be a fire run report?

Debs

Serving Others,

Debra L. Bell

Administrative Assistant
Fire Department

City of Broken Arrow

1101 North 6th Street

Broken Arrow, OK 74012

office: 918-259-8360 Ext. 6471

dbell@brokenarrowok.gov | www.brokenarrowok.gov

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NFIRS-1 Basic

A

72002	OK	12	17	2023	Station 6 (6)	2023-15905	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Location Type

Census tract:

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

3745	S-South	214TH	AVE-Avenue	E-East
Number	Prefix	Street or Highway	Street Type	Suffix

<input type="text"/>	City of Broken Arrow	OK	74014
Apt./Suite/Room	City	State	Zip Code

Cross Street

C Incident Type

E1 Dates and Times

Alarm

Arrival

Controlled

Last Unit Cleared

E2 Shifts and Alarms

Shift Alarms District

Shift or Platoon

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

<input type="text"/>	<input type="text"/>
Their FDID	Their State
<input type="text"/>	
Their Incident Number	

E3 Special Studies

ID# Value

F Actions Taken <input type="checkbox"/> 11-E xtinguishment by fire service personnel Primary Action Taken <input type="checkbox"/> 12-S ilvage & overhaul Additional Action Taken <input type="checkbox"/> 51-V entilate Additional Action Taken	G1 Resources <input checked="" type="checkbox"/> Apparatus or Personnel Module is used. <table style="margin-left: 40px;"> <tr> <td colspan="2" style="text-align: center;">Apparatus Personnel</td> </tr> <tr> <td>Suppressing</td> <td style="border: 1px solid black; text-align: center;">10</td> </tr> <tr> <td>EMS</td> <td style="border: 1px solid black; text-align: center;">7</td> </tr> <tr> <td>Other</td> <td style="border: 1px solid black; text-align: center;">6</td> </tr> </table> Resource counts include aid received resources.	Apparatus Personnel		Suppressing	10	EMS	7	Other	6	G2 Estimated Dollar Losses and Values <table style="width: 100%;"> <tr> <td style="width: 30%;">Losses:</td> <td style="width: 40%;">Required for all fires if known. Optional for all non-fires.</td> <td style="width: 30%; text-align: right;">None</td> </tr> <tr> <td>Property:</td> <td>\$ <input style="width: 80%;" type="text"/></td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Contents:</td> <td>\$ <input style="width: 80%;" type="text"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Pre-Incident Values: Optional</td> </tr> <tr> <td>Property:</td> <td>\$ <input style="width: 80%;" type="text"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>Contents:</td> <td>\$ <input style="width: 80%;" type="text"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> </table>	Losses:	Required for all fires if known. Optional for all non-fires.	None	Property:	\$ <input style="width: 80%;" type="text"/>	<input checked="" type="checkbox"/>	Contents:	\$ <input style="width: 80%;" type="text"/>	<input type="checkbox"/>	Pre-Incident Values: Optional			Property:	\$ <input style="width: 80%;" type="text"/>	<input type="checkbox"/>	Contents:	\$ <input style="width: 80%;" type="text"/>	<input type="checkbox"/>
Apparatus Personnel																												
Suppressing	10																											
EMS	7																											
Other	6																											
Losses:	Required for all fires if known. Optional for all non-fires.	None																										
Property:	\$ <input style="width: 80%;" type="text"/>	<input checked="" type="checkbox"/>																										
Contents:	\$ <input style="width: 80%;" type="text"/>	<input type="checkbox"/>																										
Pre-Incident Values: Optional																												
Property:	\$ <input style="width: 80%;" type="text"/>	<input type="checkbox"/>																										
Contents:	\$ <input style="width: 80%;" type="text"/>	<input type="checkbox"/>																										

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 type="checkbox"/> None <table style="margin-left: 20px;"> <tr> <td></td> <td style="text-align: center;">Deaths</td> <td style="text-align: center;">Injuries</td> </tr> <tr> <td>Fire Service</td> <td style="border: 1px solid black; text-align: center;">0</td> <td style="border: 1px solid black; text-align: center;">0</td> </tr> <tr> <td>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 <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 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	0	0										
Civilian	0	0										

J Property Use <input type="checkbox"/> 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
---	--	--

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: <input style="width: 100%;" type="text"/> 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:

All units dispatched and responded emergency status to a reported structure fire at the above address. Initial reports given to dispatch by bystanders stated they believed children lived in the house. They stated that there were no cars in the driveway and no one was standing outside of the residence. Reports also stated that the fire in the initial structure was starting to spread to an adjacent structure as well.

L6 arrived on scene first and gave an onscene and 360 report. L6 decided to employ a defensive strategy and began pulling defensive lines off L6.

R1 arrived on scene 2nd and went all in for VEIS of the survivable space of the exposure that was beginning to catch fire.

E4 arrived next on scene and established command.

Shortly after E4 arrived on scene, FD211 arrived and assumed command and asked for the incident commander to report to the command vehicle. E4 arrived at the command post and gave a report. E4 was then assigned exterior division with Sqd6 working for them. Their boundaries were the initial structure that was on fire. Their objective was fire extinguishment.

E1 was then assigned interior division of the exposure with L6 and Sqd4 working for them. After working for a short time Interior division stated that did not need Sqd4 working interior. Command then reassigned Sqd4 to the Exterior Division.

FD212 was assigned Medical Group Supervisor with Sqd1 working for them. Sqd1 was instructed to bring their cot to the command post and report to Med...

Full primary narrative can be found in NFIRS 15 - Supplemental

M Authorization

101651	PHILLIPS, BRANSON	CPT	BC	12/19/2023
Officer In Charge ID	Signature	Position or Rank	Assignment	Date
100171	BOECKMAN, JILL	LT	CPT	12/17/2023
Member Making Report ID	Signature	Position or Rank	Assignment	Date

NFIRS-2 Fire

A

72102	OK	12	17	2023	Station 6 (6)	2023-15905	0
FDID	State	Month	Day	Year	Station	Number	Exposure

<p>B</p> <p>Property Details</p> <p>B1 <input type="text" value="1"/> 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"/> Buildings Not Involved Number of buildings involved</p> <p>B3 <input type="text"/> None <input type="text"/> 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="Undetermined"/> 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</p> <p><input type="checkbox"/> 2 - Unintentional</p> <p><input type="checkbox"/> 3 - Failure of Equipment or Heat Source</p> <p><input type="checkbox"/> 4 - Act of Nature</p> <p><input type="checkbox"/> 5 - Cause Under Investigation</p> <p><input type="checkbox"/> U - Cause Undetermined After Investigation</p> <hr/> <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 type="checkbox"/> None</p> <p><input type="checkbox"/> 1 - Asleep</p> <p><input type="checkbox"/> 2 - Possibly impaired by alcohol or drugs</p> <p><input type="checkbox"/> 3 - Unattended person</p> <p><input type="checkbox"/> 4 - Possibly Mentally Disabled</p> <p><input type="checkbox"/> 5 - Physically Disabled</p> <p><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>
--	--	---

<p>F1</p> <p>Equipment Involved In Ignition</p> <p><input type="checkbox"/></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 type="checkbox"/></p> <p>Equipment Power Source</p> <hr/> <p>F3</p> <p>Equipment Portability</p> <p><input type="checkbox"/> 1 - Portable</p> <p><input type="checkbox"/> 2 - Stationary</p> <p>Portable equipment normally can be moved by one or two persons.</p>	<p>G</p> <p>Fire Suppression Factors</p>
---	---	--

H1 Mobile Property Involved <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 type="checkbox"/> None	H2 Mobile Property Type and Make <input type="checkbox"/> Mobile Property Type <input type="text"/> Mobile Property Make	Local Use <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 <hr/> <hr/> <hr/> <hr/> <hr/>
<input type="text"/> Mobile Property Model <input type="text"/>	<input type="text"/> Year <input type="text"/>	
<input type="text"/> State	<input type="text"/> License Plate Number	<input type="text"/> VIN

NFIRS-3 Structure Fire

<p>I1 Structure Type</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 - Enclosed Building <input type="checkbox"/> 2 - Portable/Mobile Structure <input type="checkbox"/> 3 - Open Structure <input type="checkbox"/> 4 - Air-Supported Structure <input type="checkbox"/> 5 - Tent <input type="checkbox"/> 6 - Open Platform <input type="checkbox"/> 7 - Underground Structure <input type="checkbox"/> 8 - Connective Structure <input type="checkbox"/> 0 - Other 	<p>I2 Building Status</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 - Under Construction <input type="checkbox"/> 2 - In Normal Use <input type="checkbox"/> 3 - Idle, Not Routinely Used <input type="checkbox"/> 4 - Under Major Renovation <input type="checkbox"/> 5 - Vacant and Secured <input type="checkbox"/> 6 - Vacant and Unsecured <input type="checkbox"/> 7 - Being Demolished <input type="checkbox"/> 0 - Other <input type="checkbox"/> U - Undetermined 	<p>I3 Building Height</p> <p><input type="text" value="1"/> Number of Stories At/Above Grade</p> <p><input type="text" value="0"/> Number of Stories Below Grade</p>	<p>I4 Main Floor Size</p> <p><input type="text" value="1900"/> Total Square Feet</p> <p>OR</p> <p><input type="text"/> BY <input type="text"/></p> <p>Length (ft) X Width (ft)</p>
--	---	--	--

<p>J1 Fire Origin</p> <p><input type="text" value="1"/> Below Grade</p> <p>Story of Fire Origin</p>	<p>J3 Number of Stories Damaged By Flame</p> <p><input type="text"/> Number of Stories w/Minor Damage (1-24%)</p> <p><input type="text"/> Number of Stories w/Significant Damage (25-49%)</p> <p><input type="text"/> Number of Stories w/Heavy Damage (50-74%)</p> <p><input type="text"/> Number of Stories w/Extreme Damage (75-100%)</p> <p>*Count the roof as part of the highest story</p>	<p>K Type of Material Contributing Most to Flame Spread</p> <p>K1 <input type="text"/></p> <p>Item Contributing Most to Flame Spread</p> <p>K2 <input type="text"/></p> <p>Type of Material Contributing Most To Flame Spread</p>
<p>J2 Fire Spread</p> <ul style="list-style-type: none"> <input type="checkbox"/> Confined to Object of Origin <input type="checkbox"/> 2 - Confined to Room of Origin <input type="checkbox"/> 3 - Confined to Floor of Origin <input type="checkbox"/> 4 - Confined to Building of Origin <input type="checkbox"/> 5 - Beyond Building of Origin 		

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

<p>M1</p> <p>Presence of Automatic Extinguishing System</p> <p><input type="checkbox"/> N - None Present <input type="checkbox"/> 1 - Present <input type="checkbox"/> 2 - Partial System Present <input type="checkbox"/> U - Undetermined</p>	<p>M3</p> <p>Operation of Automatic Extinguishing System</p> <p><input type="checkbox"/> 1 - Operated/Effective <input type="checkbox"/> 2 - Operated/Not Effective <input type="checkbox"/> 3 - Fire Too Small To Activate <input type="checkbox"/> 4 - Failed To Operate <input type="checkbox"/> 0 - Other <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 <input type="checkbox"/> 2 - Not Enough Agent Discharged <input type="checkbox"/> 3 - Agent Discharged But Did Not Reach Fire <input type="checkbox"/> 4 - Wrong Type of System <input type="checkbox"/> 5 - Fire Not In Area Protected <input type="checkbox"/> 6 - System Components Damaged <input type="checkbox"/> 7 - Lack of Maintenance <input type="checkbox"/> 8 - Manual Intervention <input type="checkbox"/> 0 - Other <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 <input type="checkbox"/> 2 - Dry-Pipe Sprinkler <input type="checkbox"/> 3 - Other Sprinkler System <input type="checkbox"/> 4 - Dry Chemical System <input type="checkbox"/> 5 - Foam System <input type="checkbox"/> 6 - Halogen-Type System <input type="checkbox"/> 7 - Carbon Dioxide System <input type="checkbox"/> 0 - Other <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><input type="text"/></p> <p>Required if system operated</p>	

NFIRS-9 Apparatus or Resources

A

72002	OK	12	17	2023	Station 6 (6)	2023-15905	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Apparatus/Resource	Dates/Times	Sent	Number of People	Apparatus Use	Actions Taken
ID: <input type="text" value="E1"/> Type: <input type="text" value="11-Engine"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:17"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="08:12"/>	Sent	<input type="text" value="3"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>
ID: <input type="text" value="E4"/> Type: <input type="text" value="11-Engine"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:16"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="08:13"/>	Sent	<input type="text" value="3"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>
ID: <input type="text" value="FD211"/> Type: <input type="text" value="92-Chief officer car"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:18"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="07:29"/>	Sent	<input type="text" value="1"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>
ID: <input type="text" value="FD212"/> Type: <input type="text" value="92-Chief officer car"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:19"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="07:03"/>	Sent	<input type="text" value="1"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>
ID: <input type="text" value="FD311"/> Type: <input type="text" value="60-Support apparatus, other"/>	Dispatch: <input type="text" value=""/> <input type="text" value=""/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="14:00"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="18:04"/>	Sent	<input type="text" value="1"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>
ID: <input type="text" value="FD313"/> Type: <input type="text" value="60-Support apparatus, other"/>	Dispatch: <input type="text" value=""/> <input type="text" value=""/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="14:05"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="18:04"/>	Sent	<input type="text" value="1"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>
ID: <input type="text" value="FD314"/> Type: <input type="text" value="60-Support apparatus, other"/>	Dispatch: <input type="text" value=""/> <input type="text" value=""/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="07:18"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="18:04"/>	Sent	<input type="text" value="1"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>
ID: <input type="text" value="LAD6"/> Type: <input type="text" value="13-Quint"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:14"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="10:30"/>	Sent	<input type="text" value="3"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>
ID: <input type="text" value="RES1"/> Type: <input type="text" value="71-Rescue unit"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/> Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:14"/> Clear: <input type="text" value="12/17/2023"/> <input type="text" value="09:00"/>	Sent	<input type="text" value="3"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>

ID: <input type="text" value="SQD1"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:11"/>	<input type="checkbox"/> Sent <input type="text" value="2"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> <input type="checkbox"/> EMS <input type="checkbox"/> <input type="checkbox"/> Other
Type: <input type="text" value="76-ALS unit"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:21"/>		
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="07:26"/>		
ID: <input type="text" value="SQD4"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:11"/>	<input type="checkbox"/> Sent <input type="text" value="2"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> <input type="checkbox"/> EMS <input type="checkbox"/> <input type="checkbox"/> Other
Type: <input type="text" value="76-ALS unit"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:22"/>		
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="07:10"/>		
ID: <input type="text" value="SQD6"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/>	<input type="checkbox"/> Sent <input type="text" value="2"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> <input type="checkbox"/> EMS <input type="checkbox"/> <input type="checkbox"/> Other
Type: <input type="text" value="76-ALS unit"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:58"/>		
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="07:33"/>		

NFIRS-10 Personnel

A

72002	OK	12	17	2023	Station 6 (6)	2023-15905	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Apparatus/Resource		Dates/Times	Sent	Number of People	Apparatus Use	Actions Taken
ID: <input type="text" value="E1"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/>	Sent <input type="text" value="3"/>	<input type="checkbox"/> Suppression	<input type="checkbox"/>		
Type: <input type="text" value="11-Engine"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:17"/>		<input type="checkbox"/> EMS			
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="08:12"/>		<input type="checkbox"/> Other			
Personnel ID	Name	Rank	Role	Attend	Actions Taken	
103798	Berryhill, Dalton	FF / P				<input type="checkbox"/>
103112	Okotoghaide, Jo'es	LT				<input type="checkbox"/>
100887	HARRIS, TRENT	CPT				<input type="checkbox"/>

ID: <input type="text" value="E4"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/>	Sent <input type="text" value="3"/>	<input type="checkbox"/> Suppression	<input type="checkbox"/>		
Type: <input type="text" value="11-Engine"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:16"/>		<input type="checkbox"/> EMS			
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="08:13"/>		<input type="checkbox"/> Other			
Personnel ID	Name	Rank	Role	Attend	Actions Taken	
100131	BENNETT, JOHN	CPT				<input type="checkbox"/>
101424	MIDDLESWART, RON	FF				<input type="checkbox"/>
100614	EVANS, COLTON	LT				<input type="checkbox"/>

ID: <input type="text" value="FD211"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/>	Sent <input type="text" value="1"/>	<input type="checkbox"/> Suppression	<input type="checkbox"/>		
Type: <input type="text" value="92-Chief officer car"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:18"/>		<input type="checkbox"/> EMS			
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="07:29"/>		<input type="checkbox"/> Other			
Personnel ID	Name	Rank	Role	Attend	Actions Taken	
101651	PHILLIPS, BRANSON	CPT				<input type="checkbox"/>

ID: <input type="text" value="FD212"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/>	Sent <input type="text" value="1"/>	<input type="checkbox"/> Suppression	<input type="checkbox"/>		
Type: <input type="text" value="91-Chief officer car"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:19"/>		<input type="checkbox"/> EMS			
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="07:03"/>		<input type="checkbox"/> Other			
Personnel ID	Name	Rank	Role	Attend	Actions Taken	
101076	Johnson, Christopher	EMSO				<input type="checkbox"/>

ID: <input type="text" value="FD311"/>	Dispatch: <input type="text" value=""/> <input type="text" value=""/>	Sent <input type="text" value="1"/>	<input type="checkbox"/> Suppression	<input type="checkbox"/>		
Type: <input type="text" value="61-Support apparatus, other"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="14:00"/>		<input type="checkbox"/> EMS			
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="18:04"/>		<input type="checkbox"/> Other			
Personnel ID	Name	Rank	Role	Attend	Actions Taken	
101016	HUGHES, CHRIS	Fire Marshal				<input type="checkbox"/>

ID: <input type="text" value="FD313"/>	Dispatch: <input type="text" value=""/> <input type="text" value=""/>	Sent <input type="text" value="1"/>	Suppression <input type="checkbox"/>		
Type: <input type="text" value="60-Support apparatus, other"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="14:05"/>		EMS <input type="checkbox"/>		
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="18:04"/>		Other <input type="checkbox"/>		
Personnel ID	Name	Rank	Role	Attend	Actions Taken
101893	SHARP, JUSTIN	FIRE	INV		<input type="checkbox"/>

ID: <input type="text" value="FD314"/>	Dispatch: <input type="text" value=""/> <input type="text" value=""/>	Sent <input type="text" value="1"/>	Suppression <input type="checkbox"/>		
Type: <input type="text" value="60-Support apparatus, other"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="07:18"/>		EMS <input type="checkbox"/>		
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="18:04"/>		Other <input type="checkbox"/>		
Personnel ID	Name	Rank	Role	Attend	Actions Taken
102265	WENDLANDT, SCOTT	FIRE	INV		<input type="checkbox"/>

ID: <input type="text" value="LAD6"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/>	Sent <input type="text" value="3"/>	Suppression <input type="checkbox"/>		
Type: <input type="text" value="13-Quint"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:14"/>		EMS <input type="checkbox"/>		
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="10:30"/>		Other <input type="checkbox"/>		
Personnel ID	Name	Rank	Role	Attend	Actions Taken
102949	Blocker, Garret	FF			<input type="checkbox"/>
100171	BOECKMAN, JILL	CPT			<input type="checkbox"/>
100922	HELLER, GERALD	FF / P			<input type="checkbox"/>

ID: <input type="text" value="RES1"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:05"/>	Sent <input type="text" value="3"/>	Suppression <input type="checkbox"/>		
Type: <input type="text" value="71-Rescue unit"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:14"/>		EMS <input type="checkbox"/>		
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="09:00"/>		Other <input type="checkbox"/>		
Personnel ID	Name	Rank	Role	Attend	Actions Taken
101461	MOORE, JAROD	CPT			<input type="checkbox"/>
101472	MORGAN, TREVOR	FF / P			<input type="checkbox"/>
101909	SHERIDAN, JAKE	LT			<input type="checkbox"/>

ID: <input type="text" value="SQD1"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:11"/>	Sent <input type="text" value="2"/>	Suppression <input type="checkbox"/>		
Type: <input type="text" value="76-ALS unit"/>	Arrival: <input type="text" value="12/17/2023"/> <input type="text" value="06:21"/>		EMS <input type="checkbox"/>		
	Clear: <input type="text" value="12/17/2023"/> <input type="text" value="07:26"/>		Other <input type="checkbox"/>		
Personnel ID	Name	Rank	Role	Attend	Actions Taken
103790	Saied, Casey	FF			<input type="checkbox"/>
101143	KINSEY, NATHAN	FF / P			<input type="checkbox"/>

ID: <input type="text" value="SQD4"/>	Dispatch: <input type="text" value="12/17/2023"/> <input type="text" value="06:11"/>	Sent <input type="text" value="2"/>	Suppression <input type="checkbox"/>
			EMS <input type="checkbox"/>

Type: 76-ALS unit	Arrival: 12/17/2023 06:22	Other			
	Clear: 12/17/2023 07:10				
Personnel ID	Name	Rank	Role	Attend	Actions Taken
101454	MOODY, DWIGHT	FF / P			<input type="checkbox"/>
102652	NORMAN, JORDAN	FF			<input type="checkbox"/>

ID: SQD6	Dispatch: 12/17/2023 06:05	Sent 2	Suppression <input type="checkbox"/>		
Type: 76-ALS unit	Arrival: 12/17/2023 06:58		EMS		
	Clear: 12/17/2023 07:33		Other		
Personnel ID	Name	Rank	Role	Attend	Actions Taken
101320	MARTIN, RUSTY	FF			<input type="checkbox"/>
102472	GORDON, JOSEPH	FF / P			<input type="checkbox"/>

NFIRS-1S Supplemental

A

72002	OK	12	17	2023	Station 6 (6)	2023-15905	0
FDID	State	Month	Day	Year	Station	Number	Exposure

Primary Narrative:

All units dispatched and responded emergency status to a reported structure fire at the above address. Initial reports given to dispatch by bystanders stated they believed children lived in the house. They stated that there were no cars in the driveway and no one was standing outside of the residence. Reports also stated that the fire in the initial structure was starting to spread to an adjacent structure as well.

L6 arrived on scene first and gave an onscene and 360 report. L6 decided to employ a defensive strategy and began pulling defensive lines off L6.

R1 arrived on scene 2nd and went all in for VEIS of the survivable space of the exposure that was beginning to catch fire.

E4 arrived next on scene and established command.

Shortly after E4 arrived on scene, FD211 arrived and assumed command and asked for the incident commander to report to the command vehicle. E4 arrived at the command post and gave a report. E4 was then assigned exterior division with Sqd6 working for them. Their boundaries were the initial structure that was on fire. Their objective was fire extinguishment.

E1 was then assigned interior division of the exposure with L6 and Sqd4 working for them. After working for a short time Interior division stated that did not need Sqd4 working interior. Command then reassigned Sqd4 to the Exterior Division.

FD212 was assigned Medical Group Supervisor with Sqd1 working for them. Sqd1 was instructed to bring their cot to the command post and report to Med Group Supervisor. FD212 was then tasked with doing a 360 and reporting back to the command post. FD212's 360 report stated that the two structures were actually connected by a small breezeway. The majority of the fire was in the garage area with extension into the actual house portion of the structure.

R1 finished their primary VEIS search with no victims found. R1 was then reassigned to Ventilation Group and their objectives were to coordinate ventilation with Interior Division. The Vent group supervisor chose vertical ventilation and coordinated that with fire attack. After a quick stint in rehab, R1 was tasked with shutting down utilities.

As the scene was winding down, Sqd1 was reassigned to Interior Division with the objective of a Secondary Search.

Fire was declared under control and overhaul operations began. A deputy fire marshal and utility companies were requested.

Shift change occurred and crews were either released or rotated out. L6 and E4 remained on scene for overhaul operations.

Fire under investigation by Fire Prevention Division.

All units and equipment RTS.

Apparatus Narrative for E1:

Called to structure fire. On scene time delayed due to distance. U/A E1 was 4th suppression unit in behind L6, R1, & E4. We observed an approx. 2200 sq ft single story residential structure with heavy fire involvement in the Alpha/Delta corner and in the attic space throughout. E1 went to Command post for assignment and was assigned interior division.

L6 and R1 were currently doing interior FA with an 1 3/4" hoseline. They were pulling ceiling and making progress but due to advanced involvement in the attic I elected to keep L6 on FA and put R1 on vent. R1 made roof access and made a large vent hole to reduce any additional lateral fire involvement in the attic. I knew R1 VES the bedrooms but never heard a primary done so E1 completed a primary search of the structure while they were doing these tasks. We were then assigned SQ1. I had SQ1 do a secondary search of the structure. We ensured utilities were shut off as well. Approx. around the time the fire was extinguished we called and "all clear" from victim search.

We continued to do overhaul and search through the rubble in case of any potential victims. Once everything was under control the IC released E1 from the scene and dismantled the interior division. He then made L6 the overhaul group. E1 got their tools and equipment gathered up and went available. No further action taken.

Apparatus Narrative for E4:

E4 dispatched to structure fire. Report of possible exposure to adjacent structure. L6 on scene report reported similar findings. E4 arrives in the area and laid in from a hydrant 1 block north of the fire. There was a closer hydrant showing on iPad but had not heard any reports from L6 LT so we went ahead and took the hydrant due to the defensive nature of the fire and possibly two structures involved.

E4 on scene, assumed command briefly before 211 took over. E4 assignment was external Division with S6 and eventually S4 working with us. E4 took in their own hydrant. L6 had hand jacked to the closer hydrant 1 house west of fire. No booster backup was performed due to L6 being about ready to charge their hydrant by the time we made it in with ours. I made the decision with their small water tank, that it would have taken longer to booster backup at that time, than it would have for them to take in their own hydrant.

E4 pulled two 1 3/4" lines off the truck for exterior defensive operations on the Delta side of the structure. Resources were used to run two hose lines, and get utilities located and shut off. Fire knocked down quickly. Mopping up when C shift personnel arrived to take over.

Please note, I forgot to hit en route on this fire so my en route time is incorrect. Email sent that morning to BC as requested by dispatcher when I called them.

Apparatus Narrative for LAD6:**Ladder 6 (B Shift) Narrative:**

Ladder 6 was dispatched to the above location for a residential structure fire. Initial reports have conflicting information on victim status. Initial report states that there may be people and also vacant for three years. Initial report states that an exposure on the bravo side was also catching fire. Upon arrival Ladder 6 found the initial body of what was thought to be the initial house to be fully involved with the roof already collapsed. And found what was thought to be the Bravo side exposure to have heavy fire on the Alpha/Delta corner. Ladder 6 immediately went in fast attack in the Bravo Side exposure. Pre-connect was pulled from Ladder 6. Ladder 6 Capt. did a 360 finding that it to be all one structure with a small hallway that connected the Garage portion of the house with the main living area. Ladder 6 then breached the locked door and entered through the Alpha side front door.

Rescue 1 did a coordinated VES search while the initial fire attack was being done. E4 was exterior supervisor. E4 pulled a pre-connect and attack the garage side of the fire. E1 was assigned to interior division supervisor with RES 1 Ladder 6. Primary Search was completed by Rescue 1. Sq. 6 was assigned to E4. Sq1 was reassigned from RIT/ Rehab to Secondary Search. Rescue 1 vented vertically. Fire was confirmed out and all searches were completed with an all clear. Salvage and Overhaul were completed and all hot spots were controlled. Oncoming shift was switched out with B shift crews and command was turned over to ladder 6. FD314 on-scene investigating. House appeared to be vacant with spray painted profanity on the walls. There was a gas can at the front door upon arrival and 2 on the back porch.

Apparatus Narrative for RES1:

R1 was dispatched as part of a full assignment to a residential structure fire. Initial reports were there were four people who lived in the structure, two were children, no one outside the structure per neighbor (RP). Enroute we could see flames and a large header of smoke from Lynn Lane between 51st and 41st. We arrived on scene behind L6 to find what was thought to be two separate structures. The first appeared to be fully involved with heavy fire now showing on the Alpha/Delta/Charlie end of the Bravo 1 exposure. R1 pulled past L6 to position closer to the exposure that was on fire with searchable space. L6 had setup Command and was in a defensive mode of operation. I met Command face-to-face in the front yard and advised we were going all in on a VEIS of the Alpha side of the B1 exposure. That was then broadcasted over FD211 to main and in coming units.

R1 firefighter entered the east bedroom window on the alpha side and assisted him with the TIC to isolate the door. Once isolated and search was underway, R1 Lt. entered the west bedroom window on the alpha side and again assisted with the TIC, anchoring both members from the window seal. Once R1 firefighter completed searching the initial room, we bumped up to the hallway to look for victims and check the conditions. We were able to push across the hall to search the adjacent bedroom. R1 Lt. met us in the hallway and was able to search up to the living room area. Bathroom in the hallway also searched. We were then able to move up into the dining and kitchen area where we met fire attack coming through the front door. We were only able to search up to the doorway going into the hall/breezeway that was connecting the addition and garage because of heavy fire conditions. I was then able to give Command a complete on the primary search via FD 211.

I was then assigned as the Vent Group Supervisor and advised to Coordinate with Interior Division and fire attack. R1 was pulling ceiling to check for fire extension and there was heavy fire above running down the hallway. After checking the roof and conditions from outside via TIC and visual, it was apparent that the horizontal ventilation underway was not sufficient. Trench cut over the living/dining area coordinated with fire attack would keep the fire from progressing down the hallway over and past interior crews. I met Interior Division Supervisor inside and coordinated our plan of attack. R1 crew was assigned to the roof for ventilation. Ventilation was completed and conditions immediately began to improve. The progressing fire was then contained to the area above the kitchen and extinguished.

R1 crew reported to rehab for a quick cylinder change. I met face-to-face with Command and was reassigned to secure utilities. We were unable to find the gas meter and/or shutoff for the house. While searching we discovered that the weather head going to the utility closet on the back of the home had been burned and was exposed and hanging low near a rear exit and the utility closet. This was relayed to Command over FD211. The panel was located, and the main breaker was shutoff to the electric.

We were then advised to gross decontaminate and respond to Central to trade out with the C-shift crew and have them respond to assist in overhaul. After deconning our tools and PPE, we responded to Central and traded out with the oncoming crew.

Apparatus Narrative for SQD1:

Squad 1 arrived on scene and was assigned medical group and then moved to secondary search. We searched the east side bed room area of the structure and found no victims. We then returned to service.

Apparatus Narrative for SQD6:

Sq6 was dispatched to a structure Fire, squad was staged one block north of the structure, in route potential of four victims was reported. Once on scene engine four requested assistance with a hydrant that they had one block north of the structure. Firefighter Martin, peeled from crew to assist with hydrant operations. FF Gordon assisted L6 hand laying LDH to a nearby hydrant, as they were calling for water. once opened and water was flowing to ladder 6.

Squad 6 was assigned to pull Cross lay and begin fire attack from the exterior. 1 3/4 smooth bore was deployed to the Charlie side and fire attack was commenced from exterior. Fire was brought under control. Gas cans were observed behind garage area and scene command was notified. Returned to service JG



City of Broken Arrow

PO Box 610
Broken Arrow OK 74013
Phone: (918) 259-2411 Ext. 5338
Fax: (918) 258-4998

Case Number: **DLAP-022711-2025**

**Nuisance
Public
Hearing**

Case Type: Dilapidated/Abandoned
Structure(s)

Date Case Established: 02/11/2025

Public Hearing Date: **04/02/2025**

Owner: GUEREN GEOFFREY HUNTER WHITE

Mailing Address:

GUEREN GEOFFREY HUNTER WHITE
21410 E 38TH ST S
BROKEN ARROW, OK 74014

Notice of Violation for the following location:

Address:

21410 E 38TH ST S
BROKEN ARROW, OK 74014

Parcel:

730011346

A recent inspection of the property referenced above revealed the existence of conditions, which if not abated, are considered a public nuisance according to the Oklahoma State Statutes Title 11 O.S. 22-111 and 22-112 and City of Broken Arrow City Code cited below.

Additional Information

Subdivision: Swan Lake Addition

Legal Description: SWAN LAKE ADDITION TO SUNRISE EST LOT 2 BLK 3

Description of Violation:

Violation: 15-1 (c) (15) Dilapidated Structure - Dilapidated Structure

Chapter 15 Section 15-1 (c) (15): Any building, wall, fence or other structure that has been damaged by fire, decay or otherwise, and that is so situated as to endanger the safety of the public, or which are otherwise built, erected or maintained in violation of any ordinance or code.

Corrective Action: Rehabilitate or demolish dilapidated structures upon this lot. Permits are required for either rehabilitation and/or demolition. Remove all trash, junk or debris from rehabilitation, demolition or any other activity from this lot.

Compliance Date: 03/31/2025

The violations listed above must be abated by the following action:

Rehabilitate or demolish dilapidated structure(s) upon this lot. Permits are required for either rehabilitation or demolition. Remove all trash, junk or debris from rehabilitation, demolition or any other activity from this lot.

You are further notified that the above action(s) must be completed on or before the compliance date indicated above; or in the alternative, you are directed to appear before the Hearing Officer on the hearing date indicated at the top right hand corner of this notice; at 12:00 noon, in the Council Chambers at 220 South First Street, Broken Arrow Oklahoma; to show just cause why the same shall not be abated and that upon your failure to appear the undersigned will take the necessary steps, as directed by City Ordinance, to abate such nuisance(s).

ALL COSTS ASSOCIATED WITH DEMOLITION ABATEMENT WILL BE BILLED TO THE PROPERTY OWNER AND A LIEN MAY BE IMPOSED ON THE PROPERTY TO SECURE PAYMENT

cc: **Savannah C. White**
cc: **JPMorgan Chase Bank, N.A.**
Carrington Mortgage Services LLC
As Its Atty In Fact

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

JP MORGAN CHASE BANK, N.A.
 CHASE RECORDS CENTER
 RE: COLLATERAL TRAILING DOCUMENTS
 P.O. BOX 8000
 MONROE, LA 71203

CAS (PH DLAP-022711-2025) CODE



9590 9402 8988 4064 4168 86

2. Article Number (Transfer from service label)

9589 0710 5270 2366 1246 18

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Dakota Robertson

- Agent
- Addressee

B. Received by (Printed Name)

Dakota Robertson

C. Date of Delivery

Is delivery address different from item 1? Yes

If YES, enter delivery address below:

Yes

No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Restricted Delivery

55

USPS TRACKING #



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 8988 4064 4168 86

**United States
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box•

Department of Community Development
City of Broken Arrow
P.O. Box 610
Broken Arrow, OK 74013-0610



56

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece,

COMPLETE THIS SECTION ON DELIVERY

A. Signature

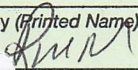
X



Agent

Addressee

B. Received by (*Printed Name*)



C. Date of Delivery

3/3/25

Address different from item 1? Yes

delivery address below: No

**JP MORGAN CHASE BANK, N.A. by
 CARRINGTON MORTGAGE SERVICES LLC
 AS ITS ATTORNEY-IN-FACT
 1600 SOUTH DOUGLASS ROAD, SUITE 200A
 ANAHEIM, CA 92806**

CAS (PH) DLAP0227112025



9590 9402 8988 4064 4169 30

2. Article Number (*Transfer from service label*)

9589 0710 5270 2366 1246 49

3. Service Type

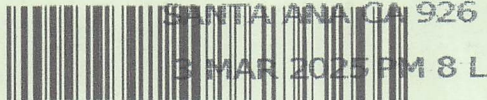
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Restricted Delivery

57

USPS TRACKING #



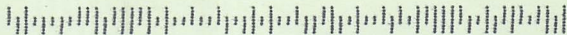
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 8988 4064 4169 30

**United States
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box•

Department of Community Development
City of Broken Arrow
P.O. Box 610
Broken Arrow, OK 74013-0610



58

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

KIVELL, RAYMENT & FRANCIS
ATTN: Jason Howell
TRIAD CENTER I, SUITE 550
7666 E. 61ST ST.
TULSA, OK 74133

CAS (PH) DLAP-022711-2025 CODE



9590 9402 8988 4064 4169 23

2. Article Number (Transfer from service label)

9589 0710 5270 2366 1245 88

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Shannon Nichols

- Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

2-28-25

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

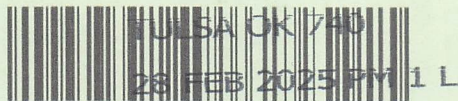
- Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

- Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

icted Delivery

59

USPS TRACKING #



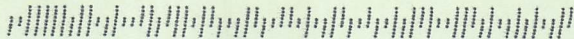
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 8988 4064 4169 23

**United States
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box•

Department of Community Development
City of Broken Arrow
P.O. Box 610
Broken Arrow, OK 74013-0610



60

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

CODE

For delivery information, visit our website at www.usps.com®.

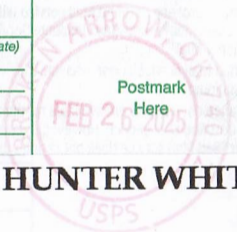
OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- | | | |
|--|----|-------|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | _____ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | _____ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | _____ |
| <input type="checkbox"/> Adult Signature Required | \$ | _____ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | _____ |



GUEREN GEOFFREY HUNTER WHITE
21410 E. 38TH ST. S.
BROKEN ARROW, OK 740142

CAS (PH) DLAP-022711-2025 COD 61

9589 0710 5270 2366 1246 25

Certified Mail service provides the following benefits:

- A receipt (this portion of the Certified Mail label).
- A unique identifier for your mailpiece.
- Electronic verification of delivery or attempted delivery.
- A record of delivery (including the recipient's signature) that is retained by the Postal Service™ for a specified period.

Important Reminders:

- You may purchase Certified Mail service with First-Class Mail®, First-Class Package Service®, or Priority Mail® service.
- Certified Mail service is *not* available for international mail.
- Insurance coverage is *not* available for purchase with Certified Mail service. However, the purchase of Certified Mail service does not change the insurance coverage automatically included with certain Priority Mail items.
- For an additional fee, and with a proper endorsement on the mailpiece, you may request the following services:
 - Return receipt service, which provides a record of delivery (including the recipient's signature). You can request a hardcopy return receipt or an electronic version. For a hardcopy return receipt, complete PS Form 3811, *Domestic Return Receipt*; attach PS Form 3811 to your mailpiece;

for an electronic return receipt, see a retail associate for assistance. To receive a duplicate return receipt for no additional fee, present this USPS®-postmarked Certified Mail receipt to the retail associate.

- Restricted delivery service, which provides delivery to the addressee specified by name, or to the addressee's authorized agent.
- Adult signature service, which requires the signee to be at least 21 years of age (not available at retail).
- Adult signature restricted delivery service, which requires the signee to be at least 21 years of age and provides delivery to the addressee specified by name, or to the addressee's authorized agent (not available at retail).
- To ensure that your Certified Mail receipt is accepted as legal proof of mailing, it should bear a USPS postmark. If you would like a postmark on this Certified Mail receipt, please present your Certified Mail item at a Post Office™ for postmarking. If you don't need a postmark on this Certified Mail receipt, detach the barcoded portion of this label, affix it to the mailpiece, apply appropriate postage, and deposit the mailpiece.

62

IMPORTANT: Save this receipt for your records.

Tax Roll Inquiry

Wagoner County Treasurer

Chasity Levi, Treasurer

307 E Cherokee

Phone: 918-485-2149

Fax: 918-485-7739

E-Mail: treasurer@wagonercounty.ok.gov



Owner Name and Address

WHITE, GUEREN GEOFFREY HUNTER
21410 E 38 ST S
BROKEN ARROW OK 74014-0000

Taxroll Information

Tax Year : 2024
Property ID : 001715-003002-000000
Location : 21410 S E 38 ST
School District : BAT3R BROKEN ARROW CITY T-3 RH Mills : 123.01
Type of Tax : Real Estate
Tax ID : 11346

Legal Description and Other Information:

SWAN LAKE ADDITION TO SUNRISE EST LOT 2 BLK 3 1.00 Lots

Assessed Valuations	Amount
Land	1910
Improvements	14039
Exemptions	1000
Net Assessed	14949

Tax Values	Amount
Base Tax	1,846.00
Penalty	0.00

Tax Values	Amount
Fees	0.00
Payments	1,846.00
Total Paid	1,846.00
Total Due	0.00

Date	Receipt	Paid With	Payment For	Amount	Paid By
12/30/2024	24665	Check	Taxes	1,846.00	CORELOGIC (R)

Login (build: 28525:20250207.2)
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02-11-2025 10:23 AM

70

Family Transfer



QUIT CLAIM DEED

INDIVIDUAL FORM

THIS INDENTURE, Made this 17 day of March, 2021 between

Savannah C White single person 21410 E 38th St S. Broken Arrow Oklahoma 74014 of the first part,

and Guereen Geoffrey Hunter White 21410 E 38th St S Broken Arrow Oklahoma 74014

of the second part, Witnesseth, that said part _____ of the first part, in consideration of the sum of: \$100.00 DOLLARS to

_____ in hand paid, the receipt of which is hereby acknowledged, do _____ hereby quitclaim, grant, bargain, sell and convey unto the said party of the second part all _____ right, title, interest, estate, and every claim and demand, both at law and in equity, in and to all the following described property situate in

Oklahoma County, State of Oklahoma, to wit: 21410 E 38th St. S. Broken Arrow Oklahoma, 74014

SWAN LK AD TO SR EST LOT 2 BLK 3
SWAN LK AD TO SR EST LOT 1 BLK 3

601715 003001 000000
601715-003002-000000

PID#:

Together with all and singular the hereditaments and appurtenances thereunto belonging.

To Have and to Hold the above described premises unto the said parties of the second part, and to the heirs and assigns of the survivor forever, so that neither the said part _____ of the first part or any person in _____ name and behalf, shall or will hereafter claim or demand any right or title to the said premises or any part thereof; but they and everyone of them shall by these presents be excluded and forever barred.

In Witness Whereof, the said part _____ of the first part ha _____ hereunto set hand the day and year first above written.

Savannah C. White

Guereen Geoffrey Hunter White

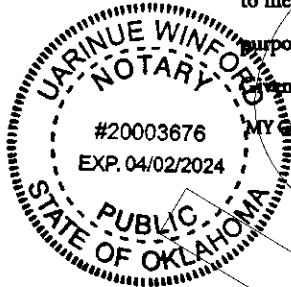
STATE OF OKLAHOMA
COUNTY OF Tulsa } ss.

INDIVIDUAL ACKNOWLEDGEMENT
OKLAHOMA FORM

Before me, the undersigned, a Notary Public in and for said County and State on this 17th day of March, 2021, personally appeared Savannah White
Guereen White

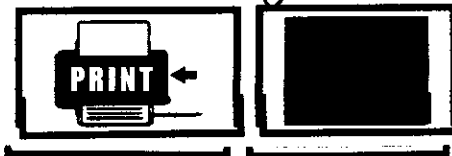
to me known to be the identical person who executed the within and foregoing instrument and acknowledged to me that _____ executed the same as _____ free and voluntary act and deed for the uses and purposes therein set forth.

Given under my hand and seal the day and year last above written.



MY COMMISSION EXPIRES: 4-2-2024

Laraine Winford NOTARY PUBLIC



UN