



NFIRS-1 Basic

A

72002	OK	04	02	2018		2018-03173	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

1129	N-North	HICKORY	PL-Place	
Number	Prefix	Street or Highway	Street Type	Suffix

	BROKEN ARROW	OK	74012
Apt./Suite/Room	City	State	Zip Code

Cross Street

C

Incident Type

111-Building fire

D

Aid Given Or Received

- ☐ 1 Mutual Aid Received
☐ 2 Auto. Aid Received
☐ 3 Mutual Aid Given
☐ 4 Auto. Aid Given
☐ 5 Other Aid Given
☒ None

Their FDID	Their State
Their Incident Number	

E1 Dates and Times

Alarm	04	02	2018	14:40
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Arrival	04	02	2018	14:43
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Controlled ☐

Last Unit Cleared	04	02	2018	19:25
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E2 Shifts and Alarms

C Shift		T-08
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Shift or Platoon Alarms District

E3 Special Studies

ID#	Value
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F Actions Taken 11-Extinguishment by Fire service personnel Primary Action Taken 21-Search Additional Action Taken 12-Salvage & overhaul Additional Action Taken	G1 Resources ☒ Apparatus or Personnel Module is used. <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center; border-bottom: 1px solid black;">Apparatus</th> <th style="text-align: center; border-bottom: 1px solid black;">Personnel</th> </tr> </thead> <tbody> <tr> <td>Suppression</td> <td style="text-align: center; border: 1px solid black; width: 50px;">6</td> <td style="text-align: center; border: 1px solid black; width: 50px;">15</td> </tr> <tr> <td>EMS</td> <td style="text-align: center; border: 1px solid black;">3</td> <td style="text-align: center; border: 1px solid black;">6</td> </tr> <tr> <td>Other</td> <td style="text-align: center; border: 1px solid black;">2</td> <td style="text-align: center; border: 1px solid black;">2</td> </tr> </tbody> </table> ☐ Resource counts include aid received resources.		Apparatus	Personnel	Suppression	6	15	EMS	3	6	Other	2	2	G2 Estimated Dollar Losses and Values Losses: Required for all fires if known. Optional for all non-fires. <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Property: \$</td> <td style="border: 1px solid black; width: 20%; text-align: center;">50,000.00</td> <td style="width: 20%; text-align: center;">☐ None</td> </tr> <tr> <td>Contents: \$</td> <td style="border: 1px solid black; text-align: center;">30,000.00</td> <td style="text-align: center;">☐ None</td> </tr> </table> Pre-Incident Values: Optional <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Property: \$</td> <td style="border: 1px solid black; width: 20%; text-align: center;">105,000.00</td> <td style="width: 20%; text-align: center;">☐ None</td> </tr> <tr> <td>Contents: \$</td> <td style="border: 1px solid black; text-align: center;">30,000.00</td> <td style="text-align: center;">☐ None</td> </tr> </table>	Property: \$	50,000.00	☐ None	Contents: \$	30,000.00	☐ None	Property: \$	105,000.00	☐ None	Contents: \$	30,000.00	☐ None
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Completed Modules ☐ 2 - Fire ☐ 3 - Structure Fire ☐ 4 - Civilian Fire Cas. ☐ 5 - Fire Service Cas. ☐ 6 - EMS ☐ 7 - HazMat ☐ 8 - Wildland Fire ☐ 9 - Apparatus ☐ 10 - Personnel ☐ 11 - Arson	H1 Casualties ☒ None <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center; border-bottom: 1px solid black;">Deaths</th> <th style="text-align: center; border-bottom: 1px solid black;">Injuries</th> </tr> </thead> <tbody> <tr> <td>Fire Service</td> <td style="text-align: center; border: 1px solid black; width: 50px;">0</td> <td style="text-align: center; border: 1px solid black; width: 50px;">0</td> </tr> <tr> <td>Civilian</td> <td style="text-align: center; border: 1px solid black;">0</td> <td style="text-align: center; border: 1px solid black;">0</td> </tr> </tbody> </table>		Deaths	Injuries	Fire Service	0	0	Civilian	0	0	H3 Hazardous Materials Release ☐ 1 - Natural Gas ☐ 2 - Propane Gas ☐ 3 - Gasoline ☐ 4 - Kerosene ☐ 5 - Diesel Fuel / Fuel Oil ☐ 6 - Household Solvents ☐ 7 - Motor Oil ☐ 8 - Paint ☐ 0 - Other ☒ None	I Mixed Use Property ☐ Not Mixed ☐ 10 - Assembly Use ☐ 20 - Education Use ☐ 33 - Medical Use ☐ 40 - Residential Use ☐ 51 - Row Of Stores ☐ 53 - Enclosed Mall ☐ 58 - Business and Residential ☐ 59 - Office Use ☐ 60 - Industrial Use ☐ 63 - Military Use ☐ 65 - Farm Use ☐ 00 - Other Mixed Use
	Deaths	Injuries										
Fire Service	0	0										
Civilian	0	0										
H2 Detector Required for Confined Fires ☐ 1 - Detector Alerted Occupants ☐ 2 - Detector Did Not Alert Them ☐ 3 - Unknown												

J Property Use ☐ None Structures 131 ☐ Church, Place of Worship 161 ☐ Restaurant or Cafeteria 162 ☐ Bar/Tavern or Nightclub 213 ☐ Elementary School, 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
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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: 400-Residential, other Description Look up and enter a Property Use code and description only if you have NOT checked a Property Use box.
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K2

Owner

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:

Dispatched to residential structure fire at 1125 N Hickory PL. Sqd 1 arrived on scene first and gave short report. Gave report of hydrant 4 or 5 houses north of fire. Upon arrival E1 gave CAN report stating smoke and fire from the AD side of the house. Established Hickory command on FD211 channel. FD211 assumed command upon arrival.

Initial conditions that were seen on the 360 were fire mainly in 2 bedrooms and a bathroom. Fire coming from windows was from the CD side to the AD side. Neighbor was asked during 360 if the house was vacant and she stated that it was.

Two 1 3/4 line were placed at the front door

E1 started fire attack with a short attack through the front AD window while acting captain masked up. After that the door had to be forced and entry was made with 1 3/4 preconnect. Upon entry fire was extinguished in 3 bedrooms as our way was made to the Alpha Delta corner of the house. The fire was extinguished an estimated 4-5 minutes after entry by E1. Primary search was completed by E7. Secondary completed by E1.

Salvage and overhaul was completed and units were released.

Investigator stayed on scene.

Approximately 2-3 hours after the fire a return trip to the site was done to check for hot spots and none were found.

M Authorization

101585	OWENS, DOUGLAS	BC	BC	04/03/2018
Officer In Charge ID	Signature	Position or Rank	Assignment	Date
100571	EASTERWOOD, KEVIN	LT	Captain	04/03/2018
Member Making Report ID	Signature	Position or Rank	Assignment	Date

NFIRS-2 Fire

A

72002	OK	04	02	2018		2018-03173	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B

Property Details

B1 ☐ Not Residential

Estimated number of residential living units in the building of origin whether or not all units became involved

B2 ☐ Buildings Not Involved

Number of buildings involved

B3 ☒ None ☐ Less than 1 acre

Acres burned (outside fires)

C

On-Site Materials
Or ProductsOn-Site Materials
Storage Use

D

Ignition

D1

Area of Fire Origin

D2

Heat Source

D3

Item First Ignited

D4

Type of Material First Ignited

E1

Cause of Ignition

- ☐ 1 - Intentional
☐ 2 - Unintentional
☐ 3 - Failure of Equipment or Heat Source
☐ 4 - Act of Nature
☒ 5 - Cause Under Investigation
☐ U - Cause Undetermined After Investigation

E2

Factors Contributing to Ignition

Factor Contributing to Ignition

E3

Human Factors Contributing to Ignition

Check all applicable boxes

- ☐ None
☐ 1 - Asleep
☐ 2 - Possibly impaired by alcohol or drugs
☐ 3 - Unattended person
☐ 4 - Possibly Mentally Disabled
☐ 5 - Physically Disabled
☐ 6 - Multiple Persons Involved

☐ 7 - Age Was A Factor

Estimated Age of Person Involved

☐ Male☐ Female

F1

Equipment Involved In Ignition

☒ None

Equipment Involved

Brand

Model

Serial #

Year

F2

Equipment Power Source

Equipment Power Source

F3

Equipment Portability

- ☐ 1 - Portable
☒ 2 - Stationary

Portable equipment normally can be moved by one or two persons.

G

Fire Suppression Factors

H1 Mobile Property Involved ☐ 1 - Not Involved in ignition, but burned ☐ 2 - Involved in ignition, but did not burn ☐ 3 - Involved in ignition and burned ☒ None	H2 Mobile Property Type and Make ☐ Mobile Property Type Mobile Property Make 	Local Use ☐ Pre-Fire Plan Available ☐ Arson Report Attached ☐ Police Report Attached ☐ Coroner Report Attached ☐ Other Reports Attached
 Mobile Property Model 		 Year
 State	 License Plate Number	 VIN

NFIRS-3 Structure Fire

I1 Structure Type ☒ 1 - Enclosed Building ☐ 2 - Portable/Mobile Structure ☐ 3 - Open Structure ☐ 4 - Air-Supported Structure ☐ 5 - Tent ☐ 6 - Open Platform ☐ 7 - Underground Structure ☐ 8 - Connective Structure ☐ 0 - Other	I2 Building Status ☐ 1 - Under Construction ☐ 2 - In Normal Use ☐ 3 - Idle, Not Routinely Used ☐ 4 - Under Major Renovation ☐ 5 - Vacant and Secured ☒ 6 - Vacant and Unsecured ☐ 7 - Being Demolished ☐ 0 - Other ☐ U - Undetermined	I3 Building Height 10 Number of Stories At/Above Grade 0 Number of Stories Below Grade	I4 Main Floor Size 1200 Total Square Feet OR BY Length (ft) X Width (ft)
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J1 Fire Origin 1 ☐ Below Grade Story of Fire Origin J2 Fire Spread ☐ Confined to Object of Origin ☐ 2 - Confined to Room of Origin ☒ 3 - Confined to Floor of Origin ☐ 4 - Confined to Building of Origin ☐ 5 - Beyond Building of Origin	J3 Number of Stories Damaged By Flame Number of Stories w/Minor Damage (1-24%) Number of Stories w/Significant Damage (25-49%) Number of Stories w/Heavy Damage (50-74%) Number of Stories w/Extreme Damage (75-100%) *Count the roof as part of the highest story	K Type of Material Contributing Most to Flame Spread K1 Item Contributing Most to Flame Spread K2 Type of Material Contributing Most To Flame Spread
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L1 Presence of Detectors ☐ N - None Present ☐ 1 - Present ☒ U - Undetermined L2 Detector Type ☐ 1 - Smoke ☐ 2 - Heat ☐ 3 - Combination of Smoke and Heat ☐ 4 - Sprinkler, Water Flow Detection ☐ 5 - More Than One Type Present ☐ 0 - Other ☐ U - Undetermined	L3 Detector Power Supply ☐ 1 - Battery Only ☐ 2 - Hardwire Only ☐ 3 - Plug-In ☐ 4 - Hardwire With Battery ☐ 5 - Plug-In With Battery ☐ 6 - Mechanical ☐ 7 - Multiple Detectors & Power Supplies ☐ 0 - Other ☐ U - Undetermined L4 Detector Operation ☐ 1 - Fire Too Small To Activate ☐ 2 - Operated ☐ 3 - Failed To Operate ☐ U - Undetermined	L5 Detector Effectiveness ☐ 1 - Alerted Occupants, Occupants Responded ☐ 2 - Alerted Occupants, Occupants Failed to Respond ☐ 3 - There Were No Occupants ☐ 4 - Failed to Alert Occupants ☐ U - Undetermined L6 Detector Failure Reason ☐ 1 - Power Failure, Shutoff, or Disconnect ☐ 2 - Improper Installation or Placement ☐ 3 - Defective ☐ 4 - Lack of Maintenance, Dirty ☐ 5 - Battery Missing or Disconnected ☐ 6 - Battery Discharged or Dead ☐ 0 - Other ☐ U - Undetermined
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M1 Presence of Automatic Extinguishing System ☒ N - None Present ☐ 1 - Present ☐ 2 - Partial System Present ☐ U - Undetermined	M3 Operation of Automatic Extinguishing System ☐ 1 - Operated/Effective ☐ 2 - Operated/Not Effective ☐ 3 - Fire Too Small To Activate ☐ 4 - Failed To Operate ☐ 0 - Other ☐ U - Undetermined Required if fire was within designed range	M5 Reason for Automatic Extinguishing System Failure ☐ 1 - System Shut Off ☐ 2 - Not Enough Agent Discharged ☐ 3 - Agent Discharged But Did Not Reach Fire ☐ 4 - Wrong Type of System ☐ 5 - Fire Not In Area Protected ☐ 6 - System Components Damaged ☐ 7 - Lack of Maintenance ☐ 8 - Manual Intervention ☐ 0 - Other ☐ U - Undetermined Required if system failed or not effective
M2 Type of Automatic Extinguishing System ☐ 1 - Wet-Pipe Sprinkler ☐ 2 - Dry-Pipe Sprinkler ☐ 3 - Other Sprinkler System ☐ 4 - Dry Chemical System ☐ 5 - Foam System ☐ 6 - Halogen-Type System ☐ 7 - Carbon Dioxide System ☐ 0 - Other ☐ U - Undetermined Required if fire was within designed range of AES	M4 Number of Sprinkler Heads Operating Required if system operated	