

A FDID State Incident Date MM DD YYYY Station Incident Number Exposure Delete Change No Activity **NFIRS-1 Basic**

B Location Type Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B. "Alternative Location Specification" Use only for wildland fires. Census Tract
 Street address
 Intersection
 In front of Number/ Milepost Prefix Street or Highway Street Type Suffix
 Rear of
 Adjacent to Apt./ Suite/ Room City State ZIP Code
 Directions
 U.S. National Grid Cross Street, Directions or National Grid, as applicable

C Incident Type Incident Type
E1 Dates and Times Midnight is 0000
 Check boxes if dates are the same as Alarm Date. Alarm
 ARRIVAL required, unless canceled or did not arrive. Arrival
 CONTROLLED optional, except for wildland fires. Controlled
 LAST UNIT CLEARED required, except for wildland fires. Last Unit Cleared
E2 Shifts and Alarms Local Option

 Shift or Platoon Alarms District
E3 Special Studies Local Option

 Special Study ID# Special Study Value

D Aid Given or Received None
 1 Mutual aid received
 2 Auto. aid received
 3 Mutual aid given
 4 Auto. aid given
 5 Other aid given
 Their FDID Their State
 Their Incident Number
F Actions Taken Primary Action Taken (1)
 Additional Action Taken (2)
 Additional Action Taken (3)
G1 Resources Check this box and skip this block if an Apparatus or Personnel Module is used.
 Apparatus Personnel
 Suppression
 EMS
 Other
 Check box if resource counts include aid received resources.
G2 Estimated Dollar Losses and Values Required for all fires if known. Optional for non-fires. None
 LOSSES: Property \$, ,
 Contents \$, ,
 PRE-INCIDENT VALUE: Optional
 Property \$, ,
 Contents \$, ,

Completed Modules
 Fire-2
 Structure Fire-3
 Civilian Fire Cas.-4
 Fire Service Cas.-5
 EMS-6
 HazMat-7
 Wildland Fire-8
 Apparatus-9
 Personnel-10
 Arson-11
H1 Casualties None
 Fire Deaths Injuries
 Service
 Civilian
H2 Detector Required for confined fires
 1 Detector alerted occupants
 2 Detector did not alert them
 U Unknown
H3 Hazardous Materials Release None
 1 Natural gas: slow leak, no evacuation or HazMat actions
 2 Propane gas: <21 lb tank (as in home BBQ grill)
 3 Gasoline: vehicle fuel tank or portable container
 4 Kerosene: fuel burning equipment or portable storage
 5 Diesel fuel/fuel oil: vehicle fuel tank or portable storage
 6 Household solvents: home/office spill, cleanup only
 7 Motor oil: from engine or portable container
 8 Paint: from paint cans totaling <55 gallons
 0 Other: special HazMat actions required or spill > 55 gal (Please complete the HazMat form.)
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 & residential
 59 Office use
 60 Industrial use
 63 Military use
 65 Farm use
 00 Other mixed use

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 Commercial 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
 Look up and enter a Property Use code and description only if you have NOT checked a Property Use box.
 Property Use Code
 Property Use Description
 NFIRS-1 Revision 01/01/05

K1 Person/Entity Involved

Local Option Business Name (if applicable) [Redacted] Area Code [Redacted] Phone Number [Redacted]

Check this box if same address as incident location (Section B). Then skip the three duplicate address lines.

Mr. Ms. Mrs. First Name [Redacted] MI [Redacted] Last Name [Redacted] Suffix [Redacted]

Number [Redacted] Prefix [Redacted] Street or Highway [Redacted] Street Type [Redacted] Suffix [Redacted]

Post Office Box [Redacted] Apt /Suite/Room [Redacted] City [Redacted]

State [Redacted] ZIP Code [Redacted]

More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary.

K2 Owner

Local Option Same as person involved? Then check this box and skip the rest of this block.

Business Name (if applicable) [Redacted] Area Code [Redacted] Phone Number [Redacted]

Check this box if same address as incident location (Section B). Then skip the three duplicate address lines.

Mr. Ms. Mrs. First Name [Redacted] MI [Redacted] Last Name [Redacted] Suffix [Redacted]

Number [Redacted] Prefix [Redacted] Street or Highway [Redacted] Street Type [Redacted] Suffix [Redacted]

Post Office Box [Redacted] Apt /Suite/Room [Redacted] City [Redacted]

State [Redacted] ZIP Code [Redacted]

L Remarks:

NATHAN JAMISON
October 28, 2018 06:55:48

Engine 03 arrived on scene and found smoldering debris on the sidewalk. A fire had burned up a tarp and other blankets/clothing. An extinguisher was used to knock down the fire prior to Engine 3's arrival. Engine 03 completed extinguishment.

More remarks? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary.

M Authorization

Check box if same as Officer in charge

Officer in charge ID [Redacted] Signature [Redacted] Position or rank [Redacted] Assignment [Redacted] Month [Redacted] Day [Redacted] Year [Redacted]

Member making report ID [Redacted] F15062 Signature [Redacted] Position or rank [Redacted] Assignment [Redacted] Month [Redacted] Day [Redacted] Year [Redacted]

A FDID 01601 State CO Incident Date 10/28/2018 Station 0086707 Incident Number 000 Exposure Delete Change **NFIRS-10 Personnel**

B Apparatus or Resources **Dates and Times** Midnight is 0000
 Check if same date as Alarm date on the Basic Module (Block E1)
 ↻ Month Day Year Hour/Min
 Sent Number of People 4 Apparatus Use Actions Taken
Check ONE box for each apparatus to indicate its main use at the incident. List up to 4 actions for each apparatus and each personnel.

1 ID E03 Dispatch 0612 Sent
 Arrival 0615
 Clear 0625
 ☆Type 11 Suppression EMS Other

Personnel ID ☆	Name	Rank or Grade	Attend <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
F0009	JOSHUA SCHAUER		<input checked="" type="checkbox"/>				
F01015	JEFF LARSON		<input checked="" type="checkbox"/>				
F13030	KENNETH SCHAVE		<input checked="" type="checkbox"/>				
F15062	NATHAN JAMISON		<input checked="" type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

2 ID Dispatch Sent
 Arrival
 Clear
 ☆Type Suppression EMS Other

Personnel ID ☆	Name	Rank or Grade	Attend <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

3 ID Dispatch Sent
 Arrival
 Clear
 ☆Type Suppression EMS Other

Personnel ID ☆	Name	Rank or Grade	Attend <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

A	<input type="text" value="01601"/> <small>FDID</small> ★	<input type="text" value="CO"/> <small>State</small> ★	<input type="text" value="10"/> <small>MM</small>	<input type="text" value="28"/> <small>DD</small>	<input type="text" value="2018"/> <small>YYYY</small>	<input type="text" value="0086707"/> <small>Incident Number</small> ★	<input type="text" value="000"/> <small>Exposure</small> ★	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> No Activity	ESO-1 Non-NFIRS Fields
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E1 Additional Incident Times												
				<small>Month</small>	<small>Day</small>	<small>Year</small>	<small>Hour</small>	<small>Min</small>				
<small>PSAP Received</small>				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<small>Dispatch Notified</small>			
				<small>Month</small>	<small>Day</small>	<small>Year</small>	<small>Hour</small>	<small>Min</small>				
				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				

B	Apparatus or Resources	Dates and Times <small>Midnight is 0000</small>		ID	En Route	District
		<small>Month</small> <small>Day</small> <small>Year</small> <small>Hour/Min</small>		<input type="text" value="5"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="1"/>	<input type="text" value="E03"/> <small>Type</small> <input type="text"/>	<small>En Route</small> <input type="text" value="10"/> <input type="text" value="28"/> <input type="text" value="2018"/> <input type="text" value="0612"/> <small>District</small> <input type="text" value="10"/> <input type="text" value="28"/> <input type="text" value="2018"/> <input type="text"/>		<input type="text" value="6"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="2"/>	<input type="text"/> <small>Type</small> <input type="text"/>	<small>En Route</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>District</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text" value="7"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="3"/>	<input type="text"/> <small>Type</small> <input type="text"/>	<small>En Route</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>District</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text" value="8"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="4"/>	<input type="text"/> <small>Type</small> <input type="text"/>	<small>En Route</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>District</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text" value="9"/>	<input type="text"/>	<input type="text"/>