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

NFIRS-1 Basic

A

FDID	State	Month	Day	Year	Station	Number	Exposure
62210	MN	03	19	2024	Station #8 (08)	SPFD240319013326	0

B **Location Type**

Census tract: 0325.00

- [x] Street Address
- [ ] Intersection
- [ ] In Front Of
- [ ] Rear Of
- [ ] Adjacent To
- [ ] Directions
- [ ] US National Grid

Number	Prefix	Street or Highway	Street Type	Suffix
759		CHARLES	AVE-Avenue	

Apt./Suite/Room	City	State	Zip Code
UPPER	Saint Paul	MN	55104

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
- [x] None

Their FDID | Their State

Their Incident Number

E1 **Dates and Times**

Alarm	03	19	2024	14:09
Arrival	03	19	2024	14:11
Controlled				
Last Unit Cleared	03	19	2024	16:09

E2 **Shifts and Alarms**

Shift or Platoon	Alarms	District
B	1	D2

E3 **Special Studies**

ID# | Value

F **Actions Taken**

11-Extinguishment by fire service personnel

Primary Action Taken

12-Salvage & overhaul

Additional Action Taken

84-Refer to proper authority

Additional Action Taken

G1 **Resources**

☑ Apparatus or Personnel Module is used.

	Apparatus	Personnel
Suppression	10	0
EMS	2	0
Other	1	0

☐ Resource counts include aid received resources.

G2 **Estimated Dollar Losses and Values**

Losses: Required for all fires if known. Optional for all non-fires. None

Property: $ 100,000.00 ☐

Contents: $ 10,000.00 ☐

Pre-Incident Values: Optional None

Property: $ 112,900.00 ☐

Contents: $ 10,000.00 ☐

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

	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

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

J **Property Use** ☐ None

Structures

131 ☐ Church, Place of Worship
161 ☐ Restaurant or Cafeteria
162 ☐ Bar/Tavern or Nightclub
213 ☐ Elementary School, Kindegarten
215 ☐ High School, Junior High
241 ☐ College, Adult Education
311 ☐ Nursing Home
331 ☐ Hospital
341 ☐ Clinic, Clinic-Type Infirmary
342 ☐ Doctor/Dentist Office
361 ☐ Prison or Jail, Not Juvenile
419 ☑ 1- or 2-Family Dwelling
429 ☐ MultiFamily Dwelling
439 ☐ Rooming/Boarding House
449 ☐ Commerical Hotel or Motel
459 ☐ Residential, Board and Care
464 ☐ Dormitory/Barracks
519 ☐ Food and Beverage Sales
539 ☐ Household Goods, Sales, Repairs
571 ☐ Gas or Service Station
579 ☐ Motor Vehicle/Boat Sales/Repairs
599 ☐ Business Office
615 ☐ Electric-Generating Plant
629 ☐ Laboratory/Science Laboratory
700 ☐ Manufacturing Plant
819 ☐ Livestock/Poultry Storage (Barn)
882 ☐ Non-Residential Parking Garage
891 ☐ Warehouse

Outside

124 ☐ Playground or Park
655 ☐ Crops or Orchard
669 ☐ Forest (Timberland)
807 ☐ Outdoor Storage Area
919 ☐ Dump or Sanitary Landfill
931 ☐ Open Land or Field
936 ☐ Vacant Lot
938 ☐ Graded/Cared for Plot of Land
946 ☐ Lake, River, Stream
951 ☐ Railroad Right-of-Way
960 ☐ Other Street
961 ☐ Highway/Divided Highway
962 ☐ Residential Street/Driveway
981 ☐ Construction Site
984 ☐ Industrial Plant Yard

Property Use:

Description

Look up and enter a Property Use code and description only if you have NOT checked a Property Use box.

K2

Owner

Local Option	Person/Entity Type	Business Name (if applicable)	Phone Number

Mr., Ms., Mrs.	First Name	MI	Last Name	Suffix

Number	Prefix	Street or Highway	Street Type	Suffix

Post Office Box	Apt./Suite/Room	City

State	Zip Code

L **Remarks:**

The fire department responded to the report of a fire in the upstairs unit of a duplex. All residents evacuated prior to fire department arrival.

Engine 18 deployed 1 3/4-inch hose line for fire attack to the upstairs unit. Ladder 18 completed a primary search of the upstairs unit, reporting an all clear. Engine 5 deployed a 1 3/4-inch back up hose line. Engine 22 secured a water supply for Engine 18. Squad 1 completed a primary search of the basement and 1st floor reporting an all clear.

Squad 1 secured electric utilities. Squad 1 also reported an all clear for 3rd floor/attic regarding searches and fire extension. Engine 22 mechanically ventilated the structure.

Ladder 22 was the IRIT and secured the gas utility. District Chief 3 was assigned as Safety Officer. Captain Albert of Medic 4 was the FIT. Car 8-Deputy Chief Jenkins assisted incident command. Car20-Interim Fire Investigator Brown was the investigator for this incident.

Engine 18 quickly extinguished the fire with minimal water and overhauled the fire area. DSI condemned both units for occupancy and worked with the building owner. Red Cross was contacted for the residents of both units. Xcel Energy locked out the gas and pulled the electrical meters. Restoration Professionals boarded up and secured the structure.

M **Authorization**

Officer In Charge ID	Signature	Position or Rank	Assignment	Date
1835	Baumeister, Arthur	DC	C2	03/19/2024

Member Making Report ID	Signature	Position or Rank	Assignment	Date
1835	Baumeister, Arthur	DC	C2	03/19/2024

NFIRS-2 Fire

A

FDID	State	Month	Day	Year	Station	Number	Exposure
62210	MN	03	19	2024	Station #8 (08)	SPFD240319013326	0

B

Property Details

B1 2 ☐ Not Residential

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

B2 1 ☐ Buildings Not Involved

Number of buildings involved

B3 ☑ None ☐ Less than 1 acre

Acres burned (outside fires)

C

On-Site Materials Or Products

On-Site Materials Storage Use

D

Ignition

D1 14-Common room, den, family room, living room, lounge

Area of Fire Origin

D2 13-Electrical arcing

Heat Source

D3 32-Bedding; blanket, sheet, comforter

Item First Ignited

D4 71-Fabric, fiber, cotton, blends, rayon, wool

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

Undetermined

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

☐

263-Extension cord

Equipment Involved

Brand

Model

Serial #

Year

F2

Equipment Power Source

☐

10-Electrical, other

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

None

Fire Suppression Factor

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
- [x] None

H2

Mobile Property Type and Make

Mobile Property Type

Mobile Property Make

Mobile Property Model

Year

State

License Plate Number

VIN

Local Use

- [ ] Pre-Fire Plan Available
- [ ] Arson Report Attached
- [ ] Police Report Attached
- [ ] Coroner Report Attached
- [ ] Other Reports Attached

NFIRS-3 Structure Fire

I1

Structure Type

- [x] 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
- [x] 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

2
Number of Stories At/Above Grade

1
Number of Stories Below Grade

I4

Main Floor Size

840
Total Square Feet

OR

____ BY ____
Length (ft) X Width (ft)

J1

Fire Origin

2 [ ] Below Grade
Story of Fire Origin

J2

Fire Spread

- [ ] Confined to Object of Origin
- [ ] 2 - Confined to Room of Origin
- [x] 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

L1

Presence of Detectors

- [ ] N - None Present
- [ ] 1 - Present
- [x] 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

M1

Presence of Automatic Extinguishing System

- [x] N - None Present
- [ ] 1 - Present
- [ ] 2 - Partial System Present
- [ ] U - Undetermined

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

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

M4

Number of Sprinkler Heads Operating

Required if system operated

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