

CALLS FOR SERVICE AT 99 N LA CIENEGA BL #303 FROM 7-1-18 TO 7-31-18

Incident Number	Call Date/Time	Dispositions	Location	Incident Type
2018-00004046	7/10/2018 18:36	RES - 1	99 N LA CIENEGA BLVD 303, BEVERLY HILLS	ABDOMINAL
2018-00003870	7/3/2018 14:12	RES - 2	99 N LA CIENEGA BLVD 303, BEVERLY HILLS	OBGYN



Incident Report



Print Date/Time: 08/05/2018 13:57
Login ID: dcoursey

Beverly Hills Fire Department
ORI Number: 19025

Incident: 2018-00003870

Incident Date/Time: 7/3/2018 2:12:53 PM
Location: 99 N LA CIENEGA BLVD 303
BEVERLY HILLS CA 90211
Phone Number:
Report Required: No
Prior Hazards: No
LE Case Number:

Incident Type: OBGYN
Venue: BEVERLY HILLS
Source: TELEPHONE
Priority: 2
Status: IN PROGRESS
Nature of Call:

Unit/Personnel

Unit	Personnel
E3	4365-Weist 04130-Selb 02723-Maher 01398-Charron
R3	4816-Prince 4662-Weinstein

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
	CALLER/RP		<UNKNOWN>				

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
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Disposition(s)

Disposition	Count
RES	2

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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CAD Narrative

07/03/2018 14:12:55 Engine 3 - e3 Narrative: Dispatch received by unit E3

07/03/2018 14:12:56 Rescue 3 - r3 Narrative: Dispatch received by unit R3

07/03/2018 14:13:30 topez Narrative: [REDACTED]

07/03/2018 14:13:43 topez Narrative: [REDACTED]

07/03/2018 14:13:50 topez Narrative: [REDACTED]



Detail Call For Service Report



Login ID: tlopez

Print Date/Time: 08/05/2018 14:04

From CFS: 760 From Date: 07/03/2018 14:12 CFS Type: All
 To CFS: 760 To Date: 07/03/2018 14:12 Agency Type:
 Layer: All Areas: All

CFS Number: 760 Call Date/Time: 07/03/2018 14:12:27 Primary Incident: 2018-00003870

Location: 99 N LA CIENEGA BLVD 303 BEVERLY HILLS, CA 90211 , BEVERLY HILLS Dispatch Time: 07/03/2018 14:12:53
 Additnl Loc Info: Arrive Time: 07/03/2018 14:15:39
 Common Name: Clear Date/Time: 07/03/2018 15:58:09
 Phone: Nature Of Call: Created By: tlopez
 Call Type: OBGYN Report Required: No Canceled: No
 Status: IN PROGRESS Priority: 2 Source: TELEPHONE
 Police ORI: CA0191000 EMS ORI: Fire ORI: 19025

Person Information

Name	Person Type	Address	Phone	Race	Sex	DOB	Age	SSN
[REDACTED]	CALLER/RP	<UNKNOWN>	[REDACTED]					

Narrative, Questionnaire Responses, TDD Text

Create Time	Created By	Narrative
07/03/2018 14:12:55	Engine 3 - e3	Dispatch received by unit E3
07/03/2018 14:12:56	Rescue 3 - r3	Dispatch received by unit R3
07/03/2018 14:13:30	tlopez	[REDACTED]
07/03/2018 14:13:43	tlopez	[REDACTED]
07/03/2018 14:13:50	tlopez	[REDACTED]

Dispositions

Disposition	Disposition Count
RES	2

Associated Areas

Area Type Code	Description
Quadrant	FRD 130
Station	Station 3
Beat	9
District	
Police ORI	CA0191000
EMS ORI	
Fire ORI	19025

Incident Number(s)

Incident Number	ORI Number	Primary Unit	Department Name	Agency Type
2018-00003870	19025	Yes	Beverly Hills Fire Department	Fire



Detail Call For Service Report



Login ID: tlopez

Print Date/Time: 08/05/2018 14:04

From CFS: 760 From Date: 07/03/2018 14:12 CFS Type: All
 To CFS: 760 To Date: 07/03/2018 14:12 Agency Type:
 Layer: All Areas: All

CFS Number: 760 Call Date/Time: 07/03/2018 14:12:27 Primary Incident: 2018-00003870

Unit(s)

Unit	Primary Unit	Radio Number	Personnel
R3	No	R3	4816 Prince 4662 Weinstein
E3	Yes	E3	4365 Weist 04130 Seib 02723 Maher 01398 Charron



Detail Call For Service Report



Login ID: tlopez

Print Date/Time: 08/05/2018 14:04

From CFS: 760 From Date: 07/03/2018 14:12 CFS Type: All
 To CFS: 760 To Date: 07/03/2018 14:12 Agency Type:
 Layer: All Areas: All

CFS Number: 760 Call Date/Time: 07/03/2018 14:12:27 Primary Incident: 2018-00003870

Call Log

Log Date/Time	Entered By	Action	Description
07/03/2018 14:12:27	tlopez	Call Created	New call created. Call Type: >NEW<, Location: , Phone Number: , Name:
07/03/2018 14:12:28	tlopez	Person Added	Name:
07/03/2018 14:12:34	tlopez	Location	Location: 99 N LA CIENEGA BLVD, Venue: BEVERLY HILLS
07/03/2018 14:12:34	tlopez	Reset Alarm Level	Fire Alarm Level Reset
07/03/2018 14:12:39	tlopez	Location	Location: 99 N LA CIENEGA BLVD, Qualifier: 303, Venue: BEVERLY HILLS
07/03/2018 14:12:45	tlopez	Call Type	NewCallType: OBGYN, Status: IN PROGRESS, Priority: 2
07/03/2018 14:12:45	tlopez	Call Updated	Dispositions Changed
07/03/2018 14:12:51	tlopez	Unit Recommendation	Recommended Run Card Unit(s): E3, R3.
07/03/2018 14:12:53	tlopez	Incident Created	Added Incident Number, ORI: 19025 , Number: 2018-00003870
07/03/2018 14:12:53	tlopez	Unit Status Action	Unit E3 DISPATCHED
07/03/2018 14:12:53	tlopez	Unit Status Action	Unit R3 DISPATCHED
07/03/2018 14:12:55	Engine 3 - e3	Narrative Added	Dispatch received by unit E3
07/03/2018 14:12:56	Rescue 3 - r3	Narrative Added	Dispatch received by unit R3
07/03/2018 14:13:00	Rescue 3 - r3	Unit Status Action	Unit R3 ENROUTE
07/03/2018 14:13:05	tlopez	Person Updated	Name: ,, Location: <UNKNOWN>, Contact Phone: [REDACTED]
07/03/2018 14:13:15	Engine 3 - e3	Unit Status Action	Unit E3 ENROUTE
07/03/2018 14:13:29	tlopez	Person Updated	Name: [REDACTED], Location: <UNKNOWN>, Contact Phone: [REDACTED]
07/03/2018 14:13:30	tlopez	Narrative Added	[REDACTED]
07/03/2018 14:13:43	tlopez	Narrative Added	[REDACTED]
07/03/2018 14:13:50	tlopez	Narrative Added	[REDACTED]
07/03/2018 14:15:39	Rescue 3 - r3	Unit Status Action	Unit R3 ON SCENE
07/03/2018 14:15:49	Engine 3 - e3	Unit Status Action	Unit E3 ON SCENE
07/03/2018 14:31:31	tlopez	Unit Status Action	Unit R3 TR
07/03/2018 14:31:36	tlopez	Unit Status Action	CEDARS
07/03/2018 14:33:38	tlopez	Unit Status Action	Unit R3 TRC
07/03/2018 14:37:34	Engine 3 - e3	Unit Status Action	
07/03/2018 14:37:34	Engine 3 - e3	Unit Status Action	Unit E3 HOSPITAL F/U
07/03/2018 15:04:34	Engine 3 - e3	Unit Status Action	Unit E3 cleared from call
07/03/2018 15:58:06	rhumpherys	Unit Status Action	Unit R3 cleared from call
07/03/2018 15:58:08	rhumpherys	Call Updated	Dispositions Changed
07/03/2018 15:58:09	rhumpherys	Call Cleared	

Unit Log

Log Date/Time	Entered By	Unit	Status	Action	Description	Location
07/03/2018 14:12:53	tlopez	R3	DISPATCHED	Unit Status Change		99 N LA CIENEGA BLVD, BEVERLY HILLS



Detail Call For Service Report



Login ID: tlopez

Print Date/Time: 08/05/2018 14:04

From CFS: 760 From Date: 07/03/2018 14:12 CFS Type: All
 To CFS: 760 To Date: 07/03/2018 14:12 Agency Type:
 Layer: All Areas: All

CFS Number: 760 Call Date/Time: 07/03/2018 14:12:27 Primary Incident: 2018-00003870

Unit Log

Log Date/Time	Entered By	Unit	Status	Action	Description	Location
07/03/2018 14:12:53	tlopez	E3	DISPATCHED	Unit Status Change		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/03/2018 14:12:55	Engine 3 - e3	E3	DISPATCHED	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/03/2018 14:12:56	Rescue 3 - r3	R3	DISPATCHED	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/03/2018 14:13:00	Rescue 3 - r3	R3	ENROUTE	Unit Status Change		
07/03/2018 14:13:00	Rescue 3 - r3	R3	ENROUTE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/03/2018 14:13:15	Engine 3 - e3	E3	ENROUTE	Unit Status Change		
07/03/2018 14:13:15	Engine 3 - e3	E3	ENROUTE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/03/2018 14:13:32	Rescue 3 - r3	R3	ENROUTE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/03/2018 14:15:39	Rescue 3 - r3	R3	ON SCENE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/03/2018 14:15:39	Rescue 3 - r3	R3	ON SCENE	Unit Status Change		
07/03/2018 14:15:49	Engine 3 - e3	E3	ON SCENE	Unit Status Change		
07/03/2018 14:15:49	Engine 3 - e3	E3	ON SCENE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/03/2018 14:31:31	tlopez	R3	TR	Unit Status Change		
07/03/2018 14:31:36	tlopez	R3	TR	Unit Location	CEDARS	CEDARS
07/03/2018 14:33:38	tlopez	R3	TRC	Unit Status Change		



Detail Call For Service Report



Login ID: llopez

Print Date/Time: 08/05/2018 14:04

From CFS: 760 **From Date:** 07/03/2018 14:12 **CFS Type:** All
To CFS: 760 **To Date:** 07/03/2018 14:12 **Agency Type:**
Layer: All **Areas:** All

CFS Number: 760 **Call Date/Time:** 07/03/2018 14:12:27 **Primary Incident:** 2018-00003870

Unit Log

Log Date/Time	Entered By	Unit	Status	Action	Description	Location
07/03/2018 14:37:34	Engine 3 - e3	E3	HOSPITAL F/U	Unit Status Change		
07/03/2018 14:37:34	Engine 3 - e3	E3	ON SCENE	Unit Location		
07/03/2018 14:37:34	Engine 3 - e3	E3	ON SCENE	Unit Check In		99 N LA CIENEGA BLVD 303, BEVERLY HILLS
07/03/2018 14:37:34	Engine 3 - e3	E3	HOSPITAL F/U	Unit Check In		99 N LA CIENEGA BLVD 303, BEVERLY HILLS
07/03/2018 15:04:34	Engine 3 - e3	E3	AOR	Unit Cleared	Unit cleared from call	
07/03/2018 15:04:34	Engine 3 - e3	E3	AOR	Unit Status Change		
07/03/2018 15:58:06	rhumpherys	R3	AOR	Unit Status Change		
07/03/2018 15:58:06	rhumpherys	R3	AOR	Unit Cleared	Unit cleared from call	



Incident Report



Print Date/Time: 08/05/2018 13:54
Login ID: dcoursey

Beverly Hills Fire Department
ORI Number: 19025

Incident: 2018-00004046

Incident Date/Time: 7/10/2018 6:36:37 PM
Location: 99 N LA CIENEGA BLVD 303
BEVERLY HILLS CA 90211
Phone Number:
Report Required: No
Prior Hazards: No
LE Case Number:

Incident Type: ABDOMINAL
Venue: BEVERLY HILLS
Source: TELEPHONE
Priority: 2
Status: IN PROGRESS
Nature of Call:

Unit/Personnel

Unit	Personnel
E3	4250-Beery 04046-Zike 02616-Core 02542-Hein
R5	

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
	CALLER/RP		<UNKNOWN>				

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
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Disposition(s)

Disposition	Count
RES	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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CAD Narrative

-9

07/10/2018 18:36:39 Engine 3 - e3 Narrative: Dispatch received by unit E3

07/10/2018 18:36:41 r5 Narrative: Dispatch received by unit R5



Detail Call For Service Report



Login ID: llopez

Print Date/Time: 08/05/2018 14:05

From CFS: 497 From Date: 07/10/2018 18:36 CFS Type: All
 To CFS: 497 To Date: 07/10/2018 18:36 Agency Type:
 Layer: All Areas: All

CFS Number: 497 Call Date/Time: 07/10/2018 18:36:19 Primary Incident: 2018-00004046

Location: 99 N LA CIENEGA BLVD 303 BEVERLY HILLS, CA 90211 , BEVERLY HILLS Dispatch Time: 07/10/2018 18:36:37
 Additnl Loc Info: Arrive Time: 07/10/2018 18:40:20
 Common Name: Clear Date/Time: 07/10/2018 19:41:33
 Phone: Nature Of Call: Created By: phines
 Call Type: ABDOMINAL Report Required: No Canceled: No
 Status: IN PROGRESS Priority: 2 Source: TELEPHONE
 Police ORI: CA0191000 EMS ORI: Fire ORI: 19025

Person Information

Name	Person Type	Address	Phone	Race	Sex	DOB	Age	SSN
[REDACTED]	CALLER/RP	<UNKNOWN>	[REDACTED]					

Narrative, Questionnaire Responses, TDD Text

Create Time	Created By	Narrative
07/10/2018 18:36:39	Engine 3 - e3	Dispatch received by unit E3
07/10/2018 18:36:41	r5	Dispatch received by unit R5

Dispositions

Disposition	Disposition Count
RES	1

Associated Areas

Area Type Code	Description
Quadrant	FRD 130
Station	Station 3
Beat	9
District	
Police ORI	CA0191000
EMS ORI	
Fire ORI	19025

Incident Number(s)

Incident Number	ORI Number	Primary Unit	Department Name	Agency Type
2018-00004046	19025	Yes	Beverly Hills Fire Department	Fire

Unit(s)

Unit	Primary Unit	Radio Number	Personnel
R5	No	R5	
E3	Yes	E3	4250 Beery 04046 Zike 02616 Core 02542 Hein



Detail Call For Service Report



Login ID: flopez

Print Date/Time: 08/05/2018 14:05

From CFS: 497 From Date: 07/10/2018 18:36 CFS Type: All
 To CFS: 497 To Date: 07/10/2018 18:36 Agency Type:
 Layer: All Areas: All

CFS Number: 497 Call Date/Time: 07/10/2018 18:36:19 Primary Incident: 2018-00004046

Call Log

Log Date/Time	Entered By	Action	Description
07/10/2018 18:36:19	phines	Call Created	New call created. Call Type: >NEW<, Location: . Phone Number: , Name:
07/10/2018 18:36:19	phines	Person Added	Name:
07/10/2018 18:36:23	phines	Location	Location: 99 N LA CIENEGA BLVD, Venue: BEVERLY HILLS
07/10/2018 18:36:23	phines	Reset Alarm Level	Fire Alarm Level Reset
07/10/2018 18:36:32	phines	Call Type	NewCallType: ABDOMINAL, Status: IN PROGRESS, Priority: 2
07/10/2018 18:36:32	phines	Call Updated	Dispositions Changed
07/10/2018 18:36:36	phines	Unit Recommendation	Recommended Run Card Unit(s): E3, R5.
07/10/2018 18:36:37	phines	Incident Created	Added Incident Number, ORI: 19025 , Number: 2018-00004046
07/10/2018 18:36:37	phines	Unit Status Action	Unit E3 DISPATCHED
07/10/2018 18:36:37	phines	Unit Status Action	Unit R5 DISPATCHED
07/10/2018 18:36:39	Engine 3 - e3	Narrative Added	Dispatch received by unit E3
07/10/2018 18:36:41	r5	Narrative Added	Dispatch received by unit R5
07/10/2018 18:36:47	phines	Person Updated	Name: [REDACTED], Location: <UNKNOWN>
07/10/2018 18:36:52	phines	Person Updated	Name: [REDACTED], Location: <UNKNOWN>, Contact Phone: [REDACTED]
07/10/2018 18:36:56	phines	Location	Location: 99 N LA CIENEGA BLVD, Qualifier: 303, Venue: BEVERLY HILLS
07/10/2018 18:37:35	Engine 3 - e3	Unit Status Action	Unit E3 ENROUTE
07/10/2018 18:37:40	r5	Unit Status Action	Unit R5 ENROUTE
07/10/2018 18:40:20	r5	Unit Status Action	Unit R5 ON SCENE
07/10/2018 18:40:27	Engine 3 - e3	Unit Status Action	Unit E3 ON SCENE
07/10/2018 18:54:14	emailtland	Unit Status Action	Unit R5 TR
07/10/2018 18:54:17	emailtland	Unit Status Action	Unit R5 TRC
07/10/2018 18:55:24	Engine 3 - e3	Unit Status Action	Unit E3 cleared from call
07/10/2018 19:41:33	r5	Unit Status Action	Unit R5 cleared from call
07/10/2018 19:41:33	r5	Call Cleared	

Unit Log

Log Date/Time	Entered By	Unit	Status	Action	Description	Location
07/10/2018 18:36:37	phines	R5	DISPATCHED	Unit Status Change		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/10/2018 18:36:37	phines	E3	DISPATCHED	Unit Status Change		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/10/2018 18:36:39	Engine 3 - e3	E3	DISPATCHED	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS



Detail Call For Service Report



Login ID: tlopez

Print Date/Time: 08/05/2018 14:05

From CFS: 497 From Date: 07/10/2018 18:36 CFS Type: All
 To CFS: 497 To Date: 07/10/2018 18:36 Agency Type:
 Layer: All Areas: All

CFS Number: 497 Call Date/Time: 07/10/2018 18:36:19 Primary Incident: 2018-00004046

Unit Log

Log Date/Time	Entered By	Unit	Status	Action	Description	Location
07/10/2018 18:36:41	r5	R5	DISPATCHED	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/10/2018 18:37:35	Engine 3 - e3	E3	ENROUTE	Unit Status Change		
07/10/2018 18:37:35	Engine 3 - e3	E3	ENROUTE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/10/2018 18:37:40	r5	R5	ENROUTE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/10/2018 18:37:40	r5	R5	ENROUTE	Unit Status Change		
07/10/2018 18:38:43	r5	R5	ENROUTE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/10/2018 18:40:20	r5	R5	ON SCENE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/10/2018 18:40:20	r5	R5	ON SCENE	Unit Status Change		
07/10/2018 18:40:27	Engine 3 - e3	E3	ON SCENE	Unit Status Change		
07/10/2018 18:40:27	Engine 3 - e3	E3	ON SCENE	Unit Check In		99 N LA CIENEGA BLVD, BEVERLY HILLS
07/10/2018 18:54:14	emaitland	R5	TR	Unit Status Change		CEDARS
07/10/2018 18:54:17	emaitland	R5	TRC	Unit Status Change		
07/10/2018 18:55:24	Engine 3 - e3	E3	AOR	Unit Cleared	Unit cleared from call	
07/10/2018 18:55:24	Engine 3 - e3	E3	AOR	Unit Status Change		
07/10/2018 19:41:33	r5	R5	AOR	Unit Status Change		
07/10/2018 19:41:33	r5	R5	AOR	Unit Cleared	Unit cleared from call	

A FDID State Incident Date Station Incident Number Exposure Delete Change **NFIRS - 1 BASIC**

B Location Type Check this box to indicate that the address for this incident is provided on the Wildland Fire Census Tract Module in Section B, "Alternative Location Specification." Use only for wildland fires. Street address Intersection In front of Rear of Adjacent to Directions US National Grid

Number/Milepost Prefix Street or Highway Street Type Suffix

Apt./Suite/Room City State ZIP Code -

Cross Street, Directions or National Grid, as applicable

C IncidentType Incident Type

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

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
Controlled CONTROLLED optional, except for wildland fires
Last Unit Cleared LAST UNIT CLEARED, required except for wildland fires

Month Day Year Hour/Min

E2 Shifts and Alarms Local option
Shift or Platoon Alarms FRD District

E3 Special Studies Local option
Special Study ID# Special Study Value

F Actions Taken

Provide advanced life su Primary Action Taken (1)
 Transport person 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	<input type="text" value="1"/>	<input type="text" value="4"/>
EMS	<input type="text" value="1"/>	<input type="text" value="2"/>
Other	<input type="text" value="0"/>	<input type="text" value="0"/>

Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses and Values

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

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 Service	Deaths	Injuries
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Civilian <input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

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 action 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

131 <input type="checkbox"/> Church, place of worship	341 <input type="checkbox"/> Clinic, clinic-type infirmary	539 <input type="checkbox"/> Household goods, sales, repairs
161 <input type="checkbox"/> Restaurant or cafeteria	342 <input type="checkbox"/> Doctor/dentist office	571 <input type="checkbox"/> Gas or service station
162 <input type="checkbox"/> Bar/tavern or nightclub	361 <input type="checkbox"/> Prison or jail, not juvenile	579 <input type="checkbox"/> Motor vehicle/boat sales/repairs
213 <input type="checkbox"/> Elementary school, kindergarten	419 <input type="checkbox"/> 1-or 2-family dwelling	599 <input type="checkbox"/> Business office
215 <input type="checkbox"/> High school, junior high	429 <input type="checkbox"/> Multifamily dwelling	615 <input type="checkbox"/> Electric-generation plant
241 <input type="checkbox"/> College, adult education	439 <input type="checkbox"/> Rooming/boardng house	629 <input type="checkbox"/> Laboratory/science laboratory
311 <input type="checkbox"/> Nursing home	449 <input type="checkbox"/> Commercial hotel or motel	700 <input type="checkbox"/> Manufacturing plant
331 <input type="checkbox"/> Hospital	459 <input type="checkbox"/> Residential, board and care	819 <input type="checkbox"/> Livestock/poultry storage (barn)
	464 <input type="checkbox"/> Dormitory/barracks	882 <input type="checkbox"/> Non-residential parking garage
	519 <input type="checkbox"/> Food and beverage sales	891 <input type="checkbox"/> Warehouse
Outside	936 <input type="checkbox"/> Vacant lot	981 <input type="checkbox"/> Construction site
124 <input type="checkbox"/> Playground or park	938 <input type="checkbox"/> Graded/cared for plot of land	984 <input type="checkbox"/> Industrial plant yard
655 <input type="checkbox"/> Crops or orchard	946 <input type="checkbox"/> Lake, river, stream	
669 <input type="checkbox"/> Forest (timberland)	951 <input type="checkbox"/> Railroad right-of-way	
807 <input type="checkbox"/> Outdoor storage area	960 <input type="checkbox"/> Other street	
919 <input type="checkbox"/> Dump or sanitary landfill	961 <input type="checkbox"/> Highway/divided highway	
931 <input type="checkbox"/> Open land or field	962 <input type="checkbox"/> Residential street/driveway	

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

A FDID State Incident Date Station Incident Number Exposure Delete Change **NFIRS - 1 BASIC**

K2 Owner Same as person involved? Then check this box and skip the rest of this block. Local Option

Business Name (if applicable) Area Code Phone Number

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

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 -

M Authorization

Check box if same as Officer in charge.

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

Member making report ID Signature Position or rank Assignment Month Day Year

A FDID State Incident Date Station Incident Number Exposure Delete Change **NFIRS - 1 BASIC**

L Remarks

Local Option

E3/R3 responded to a medical call in a doctors office, OBGYN. Patient was assessed by paramedics and was transported to CSMC for further treatment. See EMS report for further details.

B Apparatus or Resources Use codes listed below	Dates and Times Midnight is 0000 Check if same date as Alarm date on the Basic Module (Block E1)					Sent	Number of People	Apparatus Use Check ONE box for each apparatus to indicate its main use at this incident	Actions Taken List up to 4 actions for each apparatus
	Dispatch	Arrival	Clear	Month	Day				
1 ID <input type="text" value="E3"/> ★ Type <input type="text" value="11"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text" value="07"/>	<input type="text" value="03"/>	<input type="text" value="2018"/>	<input type="text" value="1412"/>	<input checked="" type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text" value="33"/> <input type="text" value="34"/>
2 ID <input type="text" value="R3"/> ★ Type <input type="text" value="76"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text" value="07"/>	<input type="text" value="03"/>	<input type="text" value="2018"/>	<input type="text" value="1412"/>	<input type="checkbox"/> Suppression <input checked="" type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text" value="33"/> <input type="text" value="34"/>
3 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
4 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
5 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
6 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
7 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
8 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
9 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>

<p>Apparatus or Resource Type</p> <p>Ground Fire Suppression</p> <ul style="list-style-type: none"> 11 Engine 12 Truck or aerial 13 Quint 14 Tanker and pumper combination 16 Brush truck 17 ARFF (aircraft rescue and firefighting) 10 Ground fire suppression, other <p>Heavy Ground Equipment</p> <ul style="list-style-type: none"> 21 Dozer or plow 22 Tractor 24 Tanker or tender 20 Heavy ground equipment, other 	<p>Aircraft</p> <ul style="list-style-type: none"> 41 Aircraft: fixed-wing tanker 42 Helitanker 43 Helicopter 40 Aircraft, other <p>Marine Equipment</p> <ul style="list-style-type: none"> 51 Fire boat with pump 52 Boat, no pump 53 Marine equipment, other <p>Support Equipment</p> <ul style="list-style-type: none"> 61 Breathing apparatus support 62 Light and air unit 60 Support apparatus, other 	<p>Medical and Rescue</p> <ul style="list-style-type: none"> 71 Rescue unit 72 Urban search and rescue unit 73 High-angle rescue unit 75 BLS unit 76 ALS unit 70 Medical and rescue unit, other <p>Other</p> <ul style="list-style-type: none"> 91 Mobile command post 92 Chief officer car 93 HazMat unit 94 Type 1 hand crew 95 Type II hand crew 99 Privately owned vehicle 00 Other apparatus / resources 	<div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>More Apparatus? Use additional</p> </div> <p>NN None UU Undetermined</p>
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A FDID State Incident Date Station Incident Number Exposure Delete Change **NFIRS - 10 PERSONNEL**

B Apparatus or Resources Use codes listed below **Dates and Times** Midnight is 0000 Check if same date as Alarm date on the Basic Module (Block E1) **Sent** **Number of People** **Apparatus Use** Check ONE box for each apparatus to indicate its main use at this incident **Actions Taken** List up to 4 actions for each apparatus

Month Day Year Hour / Min

ID Dispatch Suppression
 Arrival EMS
 Clear Other

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
4662	James Weinstein	Fire Suppr	<input checked="" type="checkbox"/>				
4365	Brenton T Weist	Fire Suppr	<input checked="" type="checkbox"/>				
04130	Dirk W Seib	Fire Suppr	<input checked="" type="checkbox"/>				
02723	Daniel A Maher	Fire Suppr	<input checked="" type="checkbox"/>				

ID Dispatch Suppression
 Arrival EMS
 Clear Other

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
4816	Austin Prince	Fire Suppr	<input checked="" type="checkbox"/>				
01398	James F Charron	Fire Suppr	<input checked="" type="checkbox"/>				

A Delete **NFIRS - 1**
 FDID State Incident Date Station Incident Number Exposure Change **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 Rear of Adjacent to Directions US National Grid

Number/Milepost Prefix Street or Highway Street Type Suffix

-

Apt./Suite/Room City State ZIP Code

Cross Street, Directions or National Grid, as applicable

C Incident Type

Incident Type

D Aid Given or Received None

Mutual aid received

Auto. aid received

Mutual aid given

Auto. aid given

Other aid given

Their FID# Their State

Their Incident Number

E1 Dates and Times Midnight is 0000

Month Day Year Hour/Min

ALARM always required

Arrival ARRIVAL required, unless cancelled or did not arrive

Controlled CONTROLLED optional, except for wildland fires

Last Unit Cleared LAST UNIT CLEARED, required except for wildland fires

Check boxes if dates are the same as Alarm Date.

E2 Shifts and Alarms Local option

Shift or Platoon Alarms District

E3 Special Studies Local option

Special Study ID# Special Study Value

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	<input type="text" value="1"/>	<input type="text" value="4"/>	
EMS	<input type="text" value="1"/>	<input type="text" value="2"/>	
Other	<input type="text" value="0"/>	<input type="text" value="0"/>	

Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses and Values

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

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

Deaths		Injuries	
Fire Service	<input type="text" value="0"/>	<input type="text" value="0"/>	
Civilian	<input type="text" value="0"/>	<input type="text" value="0"/>	

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 action 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 <input type="checkbox"/> Church, place of worship	341 <input checked="" type="checkbox"/> Clinic, clinic-type infirmary	539 <input type="checkbox"/> Household goods, sales, repairs
161 <input type="checkbox"/> Restaurant or cafeteria	342 <input type="checkbox"/> Doctor/dentist office	571 <input type="checkbox"/> Gas or service station
162 <input type="checkbox"/> Bar/tavern or nightclub	361 <input type="checkbox"/> Prison or jail, not juvenile	579 <input type="checkbox"/> Motor vehicle/boat sales/repairs
213 <input type="checkbox"/> Elementary school, kindergarten	419 <input type="checkbox"/> 1- or 2-family dwelling	599 <input type="checkbox"/> Business office
215 <input type="checkbox"/> High school, junior high	429 <input type="checkbox"/> Multifamily dwelling	615 <input type="checkbox"/> Electric-generation plant
241 <input type="checkbox"/> College, adult education	439 <input type="checkbox"/> Rooming/boarded house	629 <input type="checkbox"/> Laboratory/science laboratory
311 <input type="checkbox"/> Nursing home	449 <input type="checkbox"/> Commercial hotel or motel	700 <input type="checkbox"/> Manufacturing plant
331 <input type="checkbox"/> Hospital	459 <input type="checkbox"/> Residential, board and care	819 <input type="checkbox"/> Livestock/poultry storage (barn)
	464 <input type="checkbox"/> Dormitory/barracks	882 <input type="checkbox"/> Non-residential parking garage
	519 <input type="checkbox"/> Food and beverage sales	891 <input type="checkbox"/> Warehouse

Outside

124 <input type="checkbox"/> Playground or park	936 <input type="checkbox"/> Vacant lot	981 <input type="checkbox"/> Construction site
655 <input type="checkbox"/> Crops or orchard	938 <input type="checkbox"/> Graded/cared for plot of land	984 <input type="checkbox"/> Industrial plant yard
669 <input type="checkbox"/> Forest (timberland)	946 <input type="checkbox"/> Lake, river, stream	
807 <input type="checkbox"/> Outdoor storage area	951 <input type="checkbox"/> Railroad right-of-way	
919 <input type="checkbox"/> Dump or sanitary landfill	960 <input type="checkbox"/> Other street	
931 <input type="checkbox"/> Open land or field	961 <input type="checkbox"/> Highway/divided highway	
	962 <input type="checkbox"/> Residential street/driveway	

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

A FDID State Incident Date MM DD YYYY Station Incident Number Exposure Delete Change **NFIRS - 1 BASIC**

K2 Owner Same as person involved? Then check this box and skip the rest of this block. Local Option

Business Name (if applicable) Area Code Phone Number

Check this box if same address as incident Location (Section B), then skip the three duplicate address lines.

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 -

M Authorization

Check box if same as Officer in charge.

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

Member making report ID Signature Position or rank Assignment Month Day Year

A FDID State Incident Date MM DD YYYY Station Incident Number Exposure Delete Change **NFIRS - 1 BASIC**

L Remarks Local Option

Assisted R5 with assessment of patient who had abortion. See EMS report for further information.

B Apparatus or Resources Use codes listed below	Dates and Times Midnight is 0000 Check if same date as Alarm date on the Basic Module (Block E1)					Sent	Number of People	Apparatus Use Check ONE box for each apparatus to indicate its main use at this incident	Actions Taken List up to 4 actions for each apparatus
	Dispatch	Arrival	Clear	Month	Day				
1 ID <input type="text" value="E3"/> ★ Type <input type="text" value="11"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text" value="07"/>	<input type="text" value="10"/>	<input type="text" value="2018"/>	<input type="text" value="1836"/>	<input checked="" type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text" value="04"/> <input type="text"/> <input type="text"/>
2 ID <input type="text" value="R5"/> ★ Type <input type="text" value="76"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text" value="07"/>	<input type="text" value="10"/>	<input type="text" value="2018"/>	<input type="text" value="1836"/>	<input type="checkbox"/> Suppression <input checked="" type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text" value="02"/> <input type="text"/> <input type="text"/>
3 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/> <input type="text"/>
4 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/> <input type="text"/>
5 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/> <input type="text"/>
6 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/> <input type="text"/>
7 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/> <input type="text"/>
8 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/> <input type="text"/>
9 ID <input type="text"/> ★ Type <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/> <input type="text"/>

Apparatus or Resource Type	Aircraft	Medical and Rescue	Other
Ground Fire Suppression 11 Engine 12 Truck or aerial 13 Quint 14 Tanker and pumper combination 16 Brush truck 17 ARFF (aircraft rescue and firefighting) 10 Ground fire suppression, other	41 Aircraft: fixed-wing tanker 42 Helitanker 43 Helicopter 40 Aircraft, other	71 Rescue unit 72 Urban search and rescue unit 73 High-angle rescue unit 75 BLS unit 76 ALS unit 70 Medical and rescue unit, other	91 Mobile command post 92 Chief officer car 93 HazMat unit 94 Type 1 hand crew 95 Type II hand crew 99 Privately owned vehicle 00 Other apparatus / resources
Heavy Ground Equipment 21 Dozer or plow 22 Tractor 24 Tanker or tender 20 Heavy ground equipment, other	Marine Equipment 51 Fire boat with pump 52 Boat, no pump 53 Marine equipment, other	Support Equipment 61 Breathing apparatus support 62 Light and air unit 60 Support apparatus, other	NN None UU Undetermined

More Apparatus? Use additional

A FDID State Incident Date Station Incident Number Exposure Delete Change

NFIRS - 10 PERSONNEL

B Apparatus or Resources Use codes listed below

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

Apparatus Use Check ONE box for each apparatus to indicate its main use at this incident
 Suppression
 EMS
 Other

Actions Taken List up to 4 actions for each apparatus

ID Dispatch
 Arrival
 Clear
 ☆ Type Suppression
 EMS
 Other

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
4250	Chad J Beery	Fire Suppr	<input checked="" type="checkbox"/>				
04046	Michael C Zike	Fire Suppr	<input checked="" type="checkbox"/>				
02616	James J Core	Fire Suppr	<input checked="" type="checkbox"/>				
02542	Mark D Hein	Fire Suppr	<input checked="" type="checkbox"/>				

ID Dispatch
 Arrival
 Clear
 ☆ Type Suppression
 EMS
 Other

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
4365	Brenton T Weist	Fire Suppr	<input checked="" type="checkbox"/>				
00731	Kurt L Versteeg	Fire Suppr	<input checked="" type="checkbox"/>				