

Structure Fire Field Report

Incident Address: _____

Date: _____ Time: _____

Dispatched As _____

Observations on Arrival _____

Occupant(s) Name(s) _____

Phone (_____) _____ Home (_____) _____ Cell _____

Occupant Mailing Address _____

Owner (if Different) _____

Incident Type: Fire ___ Rescue ___ False Alarm ___ Public Service ___

Other _____

Structure Type:

Use _____ Height _____ Floor Area _____ sq ft Age _____

Reporting Party _____ Phone(_____) _____

Address _____

Comments: _____

Witnesses: Name _____ Phone _____ Address _____

Name _____ Phone _____ Address _____

Fire Suppression:

Method of Extinguishment: _____ No. & Size of Streams _____

Forcible Entry: Door _____ Window _____ Other _____

Ventilation: Door _____ Window _____ Other _____

Factors Contributing to Fire Spread:

Non-fire Stopped Walls ___ Open Stairs ___ Open Shafts ___

Interior Finish _____ Stock Arrangement _____ Horizontal Openings _____

Other _____

Source of Ignition:

Area Of Origin: Floor _____ Room _____

Equipment _____ Form of Heat _____

If Equipment: Year _____ Make _____ Model _____ Serial # _____

Material Ignited: Type _____ Form _____

Ignition Factor _____

Estimated Value: Building _____ Contents _____ Equipment _____

Estimated Fire Loss: Building _____ Contents _____ Equipment _____

Insurance:

Agent _____ Address _____

Phone _____ Insured Value _____

Mortgage/Loan information _____

Weather Conditions

Wind Speed _____ Temperature _____ Humidity _____

General Conditions _____