



COLE COUNTY FIRE PROTECTION DISTRICT

5206 MONTICELLO ROAD ■ JEFFERSON CITY, MO 65109
PHONE: 573.634.9011 ■ FAX: 573.634.9004

On Line Incident Report

Incident No. _____

Company No. _____ Date _____ Incident _____

Location _____ On Scene _____

Occupant Name _____ Phone # _____ Under-Control _____

Owner Name _____ Phone # _____ Clear Scene _____

Address _____ In Quarters _____

Incident Type (What the incident actually was – Check only one)

<input type="checkbox"/> 111 Building Fire	<input type="checkbox"/> 141 Natural Cover Fire	<input type="checkbox"/> 651 Smoke scare
<input type="checkbox"/> 112 Fire in structure other than bldg	<input type="checkbox"/> 151 Outside rubbish, trash, waste fire	<input type="checkbox"/> 700 False Call
<input type="checkbox"/> 113 Cooking fire, contained to container	<input type="checkbox"/> 424 CO Incidents	<input type="checkbox"/> 745 Alarm system sounded, no fire
<input type="checkbox"/> 114 Chimney, flue fire, structure not	<input type="checkbox"/> 531 Smoke, Odor removal	<input type="checkbox"/> 746 CO detector activation, no CO
<input type="checkbox"/> 130 Vehicle Fire	<input type="checkbox"/> 611 Cancelled Enroute	<input type="checkbox"/> Other (be specific)
<input type="checkbox"/> 131 Passenger Vehicle fire	<input type="checkbox"/> 621 Wrong location	
<input type="checkbox"/> 137 Camper, RV fire	<input type="checkbox"/> 631 Control Burn	

Aid Given or Received:

1 – Mutual Aid Received 3 – Mutual Aid Given N – None Name of Department _____

Action Taken (Check all that apply)

<input type="checkbox"/> 11 Extinguish	<input type="checkbox"/> 45 Remove Hazard	<input type="checkbox"/> 86 Investigate	<input type="checkbox"/> 00 Action taken other (be specific)
<input type="checkbox"/> 22 Rescue	<input type="checkbox"/> 51 Ventilate	<input type="checkbox"/> 92 Standby	
<input type="checkbox"/> 24 Recover body	<input type="checkbox"/> 53 Evacuate area	<input type="checkbox"/> 93 Cancelled Enroute	
<input type="checkbox"/> 43 HazMat control	<input type="checkbox"/> 78 Control traffic		

Fire Casualties

Fatal	Non Fatal
Fire Service _____	_____
Civilian Fire Casualties _____	_____

Resources

_____ # Fire Suppression Apparatus	_____ # Personnel on Apparatus
_____ # Other (POV's/Chief Vehicle etc.)	_____ # Personnel

Property Use

<input type="checkbox"/> 131 Church	<input type="checkbox"/> 655 Crops, orchard	<input type="checkbox"/> 931 Open land, field
<input type="checkbox"/> 419 1 or 2 family dwelling	<input type="checkbox"/> 659 Livestock production	<input type="checkbox"/> 961 Highway or divided highway
<input type="checkbox"/> 429 Multi-family dwelling	<input type="checkbox"/> 669 Forest, timberland, woodland	<input type="checkbox"/> 962 Residential St, Rd, or Driveway
<input type="checkbox"/> 511 Convenience store	<input type="checkbox"/> 808 Outbuilding or shed	<input type="checkbox"/> Other (be specific)
<input type="checkbox"/> 579 Motor vehicle repair	<input type="checkbox"/> 881 Detached garage	

Fire Report Only: Property

<input type="checkbox"/> Not residential	<input type="checkbox"/> None	<input type="checkbox"/> # of Residential Units	<input type="checkbox"/> # of acres burned
<input type="checkbox"/> Buildings not involved	<input type="checkbox"/> Less than 1 acre burned	<input type="checkbox"/> # of Building involved	

Fire Report Only: On-Site Materials (Report only if significant quantities present, involved or not)

<input type="checkbox"/> 131 Trees, plants, flowers	<input type="checkbox"/> 242 Beds, mattresses	<input type="checkbox"/> 613 Tools (power & hand)	<input type="checkbox"/> 712 Electronic equipment
<input type="checkbox"/> 132 Feed grain, seed	<input type="checkbox"/> 311 Lumber, sawn wood	<input type="checkbox"/> 620 Construction supplies	<input type="checkbox"/> 810 Motor vehicles
<input type="checkbox"/> 133 Hay, straw	<input type="checkbox"/> 312 Timber	<input type="checkbox"/> 625 Lighting	<input type="checkbox"/> 814 Tires
<input type="checkbox"/> 134 Crop, Not grain	<input type="checkbox"/> 410 Paper Products	<input type="checkbox"/> 626 Electrical equipment	<input type="checkbox"/> 913 Pallets
<input type="checkbox"/> 211 Curtains, drapes	<input type="checkbox"/> 510 Flammables Liquids	<input type="checkbox"/> 631 Carpets	<input type="checkbox"/> Other (be specific)
<input type="checkbox"/> 213 Bedding	<input type="checkbox"/> 511 Gasoline, diesel fuel	<input type="checkbox"/> 632 Linoleum, tile	
<input type="checkbox"/> 221 Clothes	<input type="checkbox"/> 514 Motor oil	<input type="checkbox"/> 635 Paint	
<input type="checkbox"/> 241 Furniture	<input type="checkbox"/> 522 LP Gas	<input type="checkbox"/> 711 Appliances	

Fire Report Only: On-Site Materials Storage Use

<input type="checkbox"/> 1 Bulk storage or warehousing	<input type="checkbox"/> 3 Package goods for sale	<input type="checkbox"/> N None
<input type="checkbox"/> 2 Processing or manufacturing	<input type="checkbox"/> 4 Repair or Services	

Fire Report Only: Area of Origin

<input type="checkbox"/> 21 Bedroom	<input type="checkbox"/> 65 Maintenance Shop	<input type="checkbox"/> 94 Yard, field, pasture
<input type="checkbox"/> 24 Cooking area, kitchen	<input type="checkbox"/> 74 Attic, vacant	<input type="checkbox"/> 95 Wildland, woods
<input type="checkbox"/> 25 Bathroom	<input type="checkbox"/> 77 Roof surface	<input type="checkbox"/> 98 Vacant structure
<input type="checkbox"/> 26 Laundry area	<input type="checkbox"/> 81 Passenger area, vehicles	<input type="checkbox"/> UU – Undetermined
<input type="checkbox"/> 41 Storage room, tank, bin	<input type="checkbox"/> 82 Cargo, trunk area, vehicle	<input type="checkbox"/> Other (be specific)
<input type="checkbox"/> 42 Closet	<input type="checkbox"/> 83 Engine, running gear	
<input type="checkbox"/> 43 Storage, supplies or tools	<input type="checkbox"/> 84 Fuel tank, lines	
<input type="checkbox"/> 47 Vehicle storage, garage, carport	<input type="checkbox"/> 92 On/near highway, road, parking	

Fire Report Only: Heat Source

<input type="checkbox"/> 11 Operating equip.	<input type="checkbox"/> 54 Fireworks	<input type="checkbox"/> 81 Heat from direct flame	<input type="checkbox"/> Other (be specific)
<input type="checkbox"/> 13 Arcing	<input type="checkbox"/> 61 Cigarette	<input type="checkbox"/> 82 Radiated heat/other fire	
<input type="checkbox"/> 41 Heat from friction	<input type="checkbox"/> 64 Match	<input type="checkbox"/> 83 Flying ember, spark	
<input type="checkbox"/> 43 Hot ember or ash	<input type="checkbox"/> 73 Lightning	<input type="checkbox"/> UU – Undetermined	

Fire Report Only: First Item Ignited:

<input type="checkbox"/> 11 Exterior roof	<input type="checkbox"/> 31 Mattress, pillow	<input type="checkbox"/> 73 Trees and Brush
<input type="checkbox"/> 12 Exterior wall	<input type="checkbox"/> 32 Bedding, blanket	<input type="checkbox"/> 76 Cooking materials
<input type="checkbox"/> 14 Floor covering	<input type="checkbox"/> 36 Curtains, blinds	<input type="checkbox"/> 81 Electrical wire, insulation
<input type="checkbox"/> 16 Interior ceiling	<input type="checkbox"/> 62 Flammable liq/gas in/from engine	<input type="checkbox"/> 84 Tire
<input type="checkbox"/> 17 Structural member	<input type="checkbox"/> 64 Flammable liq/gas contained	<input type="checkbox"/> 94 Dust, lint, sawdust
<input type="checkbox"/> 21 Upholstered sofa, chair, seat	<input type="checkbox"/> 65 Flammable liq/gas uncontained	<input type="checkbox"/> UU - Undetermined
<input type="checkbox"/> 25 Appliance housing	<input type="checkbox"/> 71 Agricultural Crop	<input type="checkbox"/> Other (be specific)
<input type="checkbox"/> 30 Wearing apparel	<input type="checkbox"/> 72 Grass, pasture, yard	

Fire Report Only: Type of Material Ignited

<input type="checkbox"/> 12 LP Gas	<input type="checkbox"/> 54 Hay, straw	<input type="checkbox"/> 71 Fabric, fiber
<input type="checkbox"/> 23 Gasoline	<input type="checkbox"/> 55 Grain, natural fiber	<input type="checkbox"/> UU - Undetermined
<input type="checkbox"/> 25 Diesel Fuel	<input type="checkbox"/> 63 Sawn wood	<input type="checkbox"/> Other (be specific)
<input type="checkbox"/> 27 Oil	<input type="checkbox"/> 65 Fiberboard, particle board	
<input type="checkbox"/> 41 Plastic	<input type="checkbox"/> 67 Paper	
<input type="checkbox"/> 51 Rubber	<input type="checkbox"/> 68 Car-board	

Fire Report Only: Cause of Ignition

<input type="checkbox"/> 1 Intentional	<input type="checkbox"/> 3 Failure of equipment	<input type="checkbox"/> 5 Cause under investigation
<input type="checkbox"/> 2 Unintentional	<input type="checkbox"/> 4 Act of Nature	<input type="checkbox"/> 6 Undetermined

Fire Report Only: Factors of Ignition

<input type="checkbox"/> 10 Miss use of product	<input type="checkbox"/> 20 Mechanical failure	<input type="checkbox"/> 62 Storm
<input type="checkbox"/> 12 Heat to close to combustibles	<input type="checkbox"/> 26 Backfire	<input type="checkbox"/> 72 Rekindle
<input type="checkbox"/> 13 cutting, welding too close	<input type="checkbox"/> 34 Short - circuit	<input type="checkbox"/> 73 Outside/open fire-debris burning
<input type="checkbox"/> 14 Flammable spilled	<input type="checkbox"/> 51 Collision, turn over	<input type="checkbox"/> 75 Agriculture or land management
<input type="checkbox"/> 15 Improper fueling	<input type="checkbox"/> 61 High Wind	<input type="checkbox"/> UU - Undetermined

Fire Report Only: Equipment Involved

<input type="checkbox"/> 121 Fireplace, masonry	<input type="checkbox"/> 234 Fluorescent light fixture	<input type="checkbox"/> 637 Toaster
<input type="checkbox"/> 123 Fireplace, insert, stove	<input type="checkbox"/> 262 Power cord, perm	<input type="checkbox"/> 644 Microwave Oven
<input type="checkbox"/> 126 Chimney, brick, stone, mason	<input type="checkbox"/> 263 Extension cord	<input type="checkbox"/> 641 Range w/or w/o oven
<input type="checkbox"/> 127 Chimney, metal	<input type="checkbox"/> 310 Power tool	<input type="checkbox"/> 656 Refrigerator
<input type="checkbox"/> 131 Furnace	<input type="checkbox"/> 331 Welding torch	<input type="checkbox"/> 811 clothes dryer
<input type="checkbox"/> 141 Heater	<input type="checkbox"/> 332 Cutting torch	<input type="checkbox"/> 834 Vacuum cleaner
<input type="checkbox"/> 151 Water heater	<input type="checkbox"/> 365 Bearing or brake	<input type="checkbox"/> 845 Hair dryer
<input type="checkbox"/> 210 Electrical wiring	<input type="checkbox"/> 511 Combine	<input type="checkbox"/> 853 Heating pad
<input type="checkbox"/> 217 Outlet, receptacle	<input type="checkbox"/> 512 Hay processing equipment	<input type="checkbox"/> NNN - None
<input type="checkbox"/> 213 Wall switch	<input type="checkbox"/> 524 Lawn mower	<input type="checkbox"/> UUU - Undetermined
<input type="checkbox"/> 230 Lamp, lighting	<input type="checkbox"/> 500 Garden, ag, equip, other	<input type="checkbox"/> Other (be specific)
<input type="checkbox"/> 233 Incandescent light fixture	<input type="checkbox"/> 631 Coffee maker	

Fire Report Only: Equipment Source

<input type="checkbox"/> 11 Electrical (>750 volts)	<input type="checkbox"/> 31 Gasoline	<input type="checkbox"/> 00 Other (be specific)
<input type="checkbox"/> 12 Batteries (< 50 volts)	<input type="checkbox"/> 33 Diesel	
<input type="checkbox"/> 22 LP Gas	<input type="checkbox"/> 41 Wood	

Fire Report Only: Mobile Property Involved

<input type="checkbox"/> 11 Passenger car	<input type="checkbox"/> 23 Trailer, semi	<input type="checkbox"/> 65 Agricultural vehicle
<input type="checkbox"/> 12 Bus	<input type="checkbox"/> 24 Tank truck nonflammable group	<input type="checkbox"/> 71 Home garden vehicle
<input type="checkbox"/> 14 Motor home, RV	<input type="checkbox"/> 25 Tank truck-flammable cargo	<input type="checkbox"/> 00 - Other (be specific)
<input type="checkbox"/> 17 Mobile Home	<input type="checkbox"/> 26 Tank truck compressed gas cargo	
<input type="checkbox"/> 21 General use truck	<input type="checkbox"/> 61 Construction Vehicle	

Fire Report Only: Mobile Property Involved Information

Equipment/Vehicle Make: _____

Model: _____ Year: _____

License Plate # _____ State: _____

VIN: _____

Insurance Information: _____

Structure Fire Report: Structure Type

<input type="checkbox"/> 1 Enclosed building	<input type="checkbox"/> 4 Air supported structure	<input type="checkbox"/> 7 Underground structure
<input type="checkbox"/> 2 Portable/Mobile structure	<input type="checkbox"/> 5 Tent	<input type="checkbox"/> 8 Connective structure (e.g.fences)
<input type="checkbox"/> 3 Open structure	<input type="checkbox"/> 6 Open platform (e.g. piers)	<input type="checkbox"/> 0 other type of structure

Structure Fire Report: Building Status

<input type="checkbox"/> 1 Under construction	<input type="checkbox"/> 4 Under major renovation	<input type="checkbox"/> 7 Being demolished
<input type="checkbox"/> 2 Occupied and Operating	<input type="checkbox"/> 5 Vacant & secured	<input type="checkbox"/> U - Undetermined
<input type="checkbox"/> 3 Idle, not routinely used	<input type="checkbox"/> 6 Vacant and unsecured	<input type="checkbox"/> 0 Other (be specific)

Structure Fire Report: Building Height

of Stories above ground

of Stories below ground

Structure Fire Report: Main Floor Size

Total square feet

Length X

Width

Structure Fire Report: Fire Origin

Story of fire origin

Below grade

Structure Fire Report: Fire Spread
 1 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
Structure Fire Report: Presence of Detectors 1 Present N Not present U Unable to determine**Structure Fire Report: Detector Type**
 1 Smoke
 2 Heat

 3 combination smoke – heat
 4 Sprinkler, water flow detection

 5 More than one type present
 U – Undetermined
Structure Fire Report: Detector Power Supply
 1 Battery only
 2 Hardwire only
 3 Plug in

 4 Hardwire w/battery
 5 Plug in w/battery
 6 Mechanical

 7 Multiple detectors & power supplies
 U – Undetermined
Structure Fire Report: Detector Operation
 1 Fire too small to activate
 2 Operated

 3 Failed to operate
 U – Undetermined
Structure Fire Report: Detector Effectiveness
 1 Alerted occupants, occupants responded
 2 Occupants failed to respond
 3 There were no occupants

 4 Failed to alert occupants
 U – Undetermined
Structure Fire Report: Detector Failure Reason
 1 Power failure, shutoff or disconnect
 2 Improper installation or placement
 3 Defective
 4 Lack of maintenance, includes cleaning

 5 Battery missing or disconnected
 6 Battery discharged or dead
 U – Undetermined
Check all Personnel on scene

Radio	Badge	Name	On Scene	Radio	Badge	Name	On Scene	Radio	Badge	Name	On Scene
110	1	Braun, Donnie		135	152	Rademann, Jim		162	144	Petty, Kyle	
111	2	Smith, Gary W.		136	79	Hammann, Jason		163	164	Curry, Nacy	
112	3	Hammann, Wayne		138	80	Hammann, Josh		164	147	James Feltrop	
113	51	Kempker, Tom		139	30	Hart, Mike		165	83	York, Shawn	
114	5	Rackers, Mike		140	122	Long, Matthew		166	158	Lepper, Bradley	
116	7	Cearlock, Steve		142	141	Middlecamp, Allee		167	151	Isenberg, Clayton	
117	8	Hammann, Galen		143	167	Lewis, Brian		168	153	Bashore, Adam	
118	9	Hammann, Robbie		144	35	Braun, Alan		169	86	Luebbering, Dave	
119	138	Gish, Aron		145	109	Angerer, Chuck		170	154	Luebbering, Jill	
120	161	Braun, Justin		146	115	Berendzen, Eric		171	88	Cortvrient, Alan	
121	199	Farr, Bill		147	142	Wieberg, Kevin		172	157	Wirtel, William	
122	13	Barnes, Steve		148	166	Rush, Garret		173	160	Middlecamp, Brady	
123	6	Braun, Gary		149	165	Nacy, Chris		175	162	Lamberson, Brad	
124	4	Braun, Steve		150	143	Kempker, Jerry		177	94	Luebbering, Doug	
125	133	Bopp, Blake		151	145	Morris, Rachel		178	37	Benz, Larry	
126	17	Rizner, Larry		152	120	Moore, John		179	95	Luebbering, Josh	
127	18	Gordon, Richard		153	150	Prenger, Matt		180	96	Luebbering, Myron	
128	19	Call, James G.		154	126	Moore, James		181	97	Luebbering, Nathan	
129	20	Braun, Bill		156	49	Hammann, Chris		182	163	Ferkel, Chris	
130	135	Jones, Mike		157	169	Berendzen, Bob		183	128	Morris, Bryan	
131	22	Barnard, Larry		158	52	Berendzen, David		184	129	Williams, Daron	
132	21	Berendzen, Gary		159	53	Engelbrecht, Larry		185	130	Bittle, Jason	
133	148	Graham, Travis		160	54	Kempker, Scott		186	102	Otto, Norman	
134	25	Wilbers, Robert		161	67	Schulte, Bernard		515	136	Carsten, Pam	

Check all Apparatus on scene:

1101		1201		1301		1401		1501		1601		1701		1801	
1110		1210		1310		1410		1510		1610		1702		1831	
1120		1220		1311		1420		1511		1620		1710		Trailer	
		1221		1320		1431		1520		1621		1720			
		1251						1531		1622		Generator			

**Narrative: Description of incident, fire department action and tactics, your company action and sketch of incident.
(Use additional sheets if necessary)**

Signatures

PREPARED BY SIGN AND DATE

INCIDENT COMMANDER SIGN AND DATE

APPROVED BY (ASSISTANT CHIEF) SIGN AND DATE