

A FDID * 27218 State * MN Incident Date * 07 16 2017 Station 28 Incident Number * 17-0025870 Exposure * 000 Delete Change No Activity **NFIRS -1 Basic**

B Location* 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 5024 Washburn AVE S
 Number/Milepost Prefix Street or Highway Street Type Suffix

Intersection In front of Rear of Adjacent to Directions

MINNEAPOLIS MN 55410
 Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type *
551A Assist police - Washdown
 Incident Type

E1 Date & Times Midnight is 0000
 Check boxes if dates are the same as Alarm Date. ALARM always required
 Alarm * 07 16 2017 09:11:57
 Month Day Year Hr Min Sec

E2 Shift & Alarms Local Option
C 01 228B
 Shift or Alarms District Platoon

D Aid Given or Received*

1 Mutual aid received
 2 Automatic aid recv.
 3 Mutual aid given
 4 Automatic aid given
 5 Other aid given
 N None

Their FDID Their State
 Their Incident Number

ARRIVAL required, unless canceled or did not arrive
 Arrival * 07 16 2017 09:15:35
 CONTROLLED Optional, Except for wildland fires
 Controlled
 LAST UNIT CLEARED, required except for wildland fires
 Last Unit Cleared 07 16 2017 09:41:51

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

F Actions Taken *

76 Provide water
 Primary Action Taken (1)

Additional Action Taken (2)
 Additional Action Taken (3)

G1 Resources *
 Check this box and skip this section if an Apparatus or Personnel form is used.

Apparatus Personnel
 Suppression 0001 0003
 EMS Other
 Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses & Values

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

Property \$ 000 , 000 , 000
 Contents \$ 000 , 000 , 000

PRE-INCIDENT VALUE: Optional
 Property \$ 000 , 000 , 000
 Contents \$ 000 , 000 , 000

Completed Modules

Fire-2
 Structure-3
 Civil Fire Cas.-4
 Fire Serv. Cas.-5
 EMS-6
 HazMat-7
 Wildland Fire-8
 Apparatus-9
 Personnel-10
 Arson-11

H1* Casualties None
 Deaths Injuries
 Fire Service Civilian
H2 Detector Required for Confined Fires.
 1 Detector alerted occupants
 2 Detector did not alert them
 U Unknown

H3 Hazardous Materials Release

N 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
 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 > 55gal., Please complete the HazMat form

I Mixed Use Property

NN Not Mixed
 10 Assembly use
 20 Education use
 33 Medical use
 40 Residential use
 51 Row of stores
 53 Enclosed mall
 58 Bus. & Residential
 59 Office use
 60 Industrial use
 63 Military use
 65 Farm use
 00 Other mixed use

J Property Use* Structures

131 Church, place of worship
 161 Restaurant or cafeteria
 162 Bar/Tavern or nightclub
 213 Elementary school or kindergarten
 215 High school or junior high
 241 College, adult education
 311 Care facility for the aged
 331 Hospital

341 Clinic, clinic type infirmary
 342 Doctor/dentist office
 361 Prison or jail, not juvenile
 419 1-or 2-family dwelling
 429 Multi-family 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
 579 Motor vehicle/boat sales/repair
 571 Gas or service station
 599 Business office
 615 Electric generating plant
 629 Laboratory/science lab
 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/care 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

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:
 Property Use 963
Street or road in commercial
 NFIRS-1 Revision 03/11/99

MM DD YYYY

27218
FDID *

MN
State *

7 16
Incident Date *

2017

28
Station

17-0025870
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

E28 was dispatched to a wash down, When we arrived there was a medium amount of blood on the sidewalk, We put bleach on the blood and waited 10 minutes. We then washed down the area and used the scrub brush to remove the blood. There was still a stain in the sidewalk that couldn't be removed. E28 Cleared

A FDID 27218 * State MN * Incident Date 7 16 2017 * Station 28 Incident Number 17-0025870 * Exposure 000 * Delete Change **NFIRS - 9 Apparatus or Resources**

B Apparatus or * Resource	Date and Times					Sent <input checked="" type="checkbox"/>	Number of * People	Use <small>Check ONE box for each apparatus to indicate its main use at the incident.</small>	Actions Taken	
	<small>Check if same as alarm date</small> Month Day Year Hour Min									
1 ID <u>E28</u> Type <u>11</u>	Dispatch <input checked="" type="checkbox"/>	<u>7</u>	<u>16</u>	<u>2017</u>	<u>09:11</u>	<input checked="" type="checkbox"/>	<u>3</u>	<input checked="" type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input checked="" type="checkbox"/>	<u>7</u>	<u>16</u>	<u>2017</u>	<u>09:15</u>			<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input checked="" type="checkbox"/>	<u>7</u>	<u>16</u>	<u>2017</u>	<u>09:41</u>			<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
2 ID _____ Type _____	Dispatch <input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input type="checkbox"/>							<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input type="checkbox"/>							<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
3 ID _____ Type _____	Dispatch <input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input type="checkbox"/>							<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input type="checkbox"/>							<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
4 ID _____ Type _____	Dispatch <input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input type="checkbox"/>							<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input type="checkbox"/>							<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
5 ID _____ Type _____	Dispatch <input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input type="checkbox"/>							<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input type="checkbox"/>							<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
6 ID _____ Type _____	Dispatch <input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input type="checkbox"/>							<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input type="checkbox"/>							<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
7 ID _____ Type _____	Dispatch <input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input type="checkbox"/>							<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input type="checkbox"/>							<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
8 ID _____ Type _____	Dispatch <input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input type="checkbox"/>							<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input type="checkbox"/>							<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
9 ID _____ Type _____	Dispatch <input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/> Suppression	<input type="checkbox"/>	<input type="checkbox"/>
	Arrival <input type="checkbox"/>							<input type="checkbox"/> EMS	<input type="checkbox"/>	<input type="checkbox"/>
	Clear <input type="checkbox"/>							<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>

Type of Apparatus or Resources

<p>Ground Fire Suppression</p> <p>11 Engine</p> <p>12 Truck or aerial</p> <p>13 Quint</p> <p>14 Tanker & pumper combination</p> <p>16 Brush truck</p> <p>17 ARF (Aircraft Rescue and Firefighting)</p> <p>10 Ground fire suppression, other</p> <p>Heavy Ground Equipment</p> <p>21 Dozer or plow</p> <p>22 Tractor</p> <p>24 Tanker or tender</p> <p>20 Heavy equipment, other</p> <p>Aircraft</p> <p>41 Aircraft: fixed wing tanker</p> <p>42 Helitanker</p> <p>43 Helicopter</p> <p>40 Aircraft, other</p>	<p>Marine Equipment</p> <p>51 Fire boat with pump</p> <p>52 Boat, no pump</p> <p>50 Marine apparatus, other</p> <p>Support Equipment</p> <p>61 Breathing apparatus support</p> <p>62 Light and air unit</p> <p>60 Support apparatus, other</p> <p>Medical & Rescue</p> <p>71 Rescue unit</p> <p>72 Urban Search & rescue unit</p> <p>73 High angle rescue unit</p> <p>75 BLS unit</p> <p>76 ALS unit</p> <p>70 Medical and rescue unit, other</p>	<p>More Apparatus? Use Additional Sheets</p> <p>Other</p> <p>91 Mobile command post</p> <p>92 Chief officer car</p> <p>93 HazMat unit</p> <p>94 Type 1 hand crew</p> <p>95 Type 2 hand crew</p> <p>99 Privately owned vehicle</p> <p>00 Other apparatus/resource</p> <p>NN None</p> <p>UU Undetermined</p>
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NFIRS-9 Revision 11/17/98