

PROVINCE OF BRITISH COLUMBIA
Ministry of Justice
Emergency Management BC / Office of the Fire Commissioner

FIRE REPORT - STRUCTURE

INCIDENT NUMBER: CVA 2014 07 22 03 03

Location of Incident: **1165 MAINLAND ST
VANCOUVER BC**

of Occupants (At time of fire): 0 # of Injured: 0 # of Deaths: 0 Total Dollar Loss Estimate **s.21**

Related to Wildland Interface Fire: NO Property Value **s.21** Content Value: \$0 Total Value at Risk: **s.21**

Code Name : Code Description

PROPERTY COMPLEX : 1700 FOOD OR BEVERAGE ESTABLISHMENT
PROPERTY CLASSIFICATION : 1710 RESTAURANT - INCLUDES EATING PLACES SPECIALIZING IN FOOD PRI
GENERAL CONSTRUCTION : 3000 HEAVY TIMBER CONSTRUCTION
BUILDING HEIGHT : 0050 5 STORIES ABOVE GRADE
GROUND FLOOR AREA : 2000 101 TO 500M2 (1077 - 5382FT2)
YEAR OF CONSTRUCTION : 0020 1920 OR BEFORE
MANUAL FIRE PROTECTION : 2000 EXTINGUISHERS & STANDPIPE SYSTEM
OUTSIDE FIRE PROTECTION : 1000 PUBLIC HYDRANT PROTECTION & FIRE DEPARTMENT
SPRINKLER PROTECTION : 1000 COMPLETE SPRINKLER PROTECTION - SUPERVISED (ON-SITE OR OFF-S
AUTOMATIC FIRE ALARM SYSTE : 3000 FIRE ALARM SYSTEM - OFF-SITE MONITORING AGENCY
SMOKE ALARM OPERATION : 0000 ALARM OPERATION CANNOT BE DETERMINED
INITIAL DETECTION : 7000 VISUAL SIGHTING OR OTHER MEANS OF PERSONAL DETECTION (E.G. S
TRANSMISSION OF ALARM : 1000 911
FIRE SERVICE : 1000 CAREER FIRE DEPARTMENT ONLY
INCIDENT : 1000 FIRE - FIRE DEPARTMENT ATTENDED
ACTION TAKEN : 3000 EXTINGUISHED BY FIRE DEPARTMENT
METHOD OF FIRE CONTROL : 4200 38MM OR 42MM (1 1/2" OR 1 3/4") HOSE - 1 HAND LINE
FIRE ORIGIN, LEVEL : 3000 GROUND FLOOR, GRADE LEVEL OR GRADE TO 3M (10FT)
FIRE ORIGIN, AREA : 3100 KITCHEN, COOKING AREA
EXTENT OF FIRE : 2000 CONFINED TO PART OF ROOM/AREA OF ORIGIN
EXTENT OF DAMAGE : 4000 CONFINED TO FLOOR LEVEL OF ORIGIN
IGNITING OBJECT : 0000 CANNOT BE DETERMINED
FUEL OR ENERGY : 0000 CANNOT BE DETERMINED
FORM OF HEAT : 0000 CANNOT BE DETERMINED
MATERIAL FIRST IGNITED : 0000 CANNOT BE DETERMINED
ACT OR OMISSION : 0000 CANNOT BE DETERMINED

Investigating Officer LAFC Badge #
SEREDA, GREGORY 2575

Telephone ReportDate
604-665-6078 2014-08-26

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FIRE REPORT - STRUCTURE (NARRATIVE)

INCIDENT NUMBER: CVA 2014 07 22 03 03

Remarks:

VC73 TO 1165 MAINLAND ST FOR A STRUCTURE FIRE. VE08 ON SCENE CAPT ETHERIDGE, MARTY FIRST IN. B/C WILSON IN COMMAND. FIVE STOREY MASONRY COMMERCIAL AND RESIDENTIAL STRUCTURE ALARMED AND SPRINKLERED. BUILDING OWNED BY GRINTI ENTERPRISES s.22 s.22 BUILDING OCCUPIED BY HUB RESTAURANT AND LOUNGE. BUILDING MAINTENANCE MANAGER ON SCENE s.22 NO STAFF ON SCENE. FORTIS GAS s.22 AND BC HYDRO s.22 ON SCENE. POINT OF ORIGIN IS ON THE COUNTER ABOVE THE DISHWASHER. ALL FIRE PATTERNS POINT TO THE AREA BELOW THE SPRINKLER ACTIVATED. CONSIDERABLE AMOUNT OF MELTED PLASTIC IN AREA MADE IT DIFFICULT TO DETERMINE SOURCE OF IGNITION. WAITING TO SPEAK WITH RESTAURANT STAFF WHO CLOSED THAT EVENING. FIRE TRAVELED UPWARD AND OUTWARD FROM THIS POINT, BREAKING GLASS BEHIND COUNTER AND CAUSING SMALL DROP DOWN FIRE BEHIND DEEP FRYER. ACCIDENTAL FIRE, PROBABLE CAUSE , HOT OBJECT PLACED ON COUNTER IGNITING COMBUSTIBLES AROUND IT. EXTENSIVE WATER DAMAGE TO ENTIRE RESTAURANT. SLIGHT FIRE DAMAGE TO KITCHEN AREA. SCENE LEFT IN CARE OF MAINTENANCE MANAGER. CITY BOARD UP CREW ON SCENE SECURING FRONT DOOR

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FIRE REPORT - STRUCTURE (NAMES)

INCIDENT NUMBER: CVA 2014 07 22 03 03

Name no. : 1
Name : s.22
Address : 0

Name Status : OCCUPANT
Phone : s.22

Claims Adjuster Name :
Claims Adjuster Firm :
Claim Number :
Insurance Company :
Policy Number :

LOSS ESTIMATES:

Property Loss : \$0

Content Loss : \$0

Total Loss : \$0

REMARKS:

Name no. : 2
Name : s.22
Address : 0

Name Status : WITNESS
Phone : s.22

Claims Adjuster Name :
Claims Adjuster Firm :
Claim Number :
Insurance Company :
Policy Number :

LOSS ESTIMATES:

Property Loss : \$0

Content Loss : \$0

Total Loss : \$0

REMARKS:

Investigating Officer : LAFB Badge #
SEREDA, GREGORY : 2575

Telephone : ReportDate
604-665-6078 : 2014-08-26

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FIRE REPORT - STRUCTURE (NAMES)

INCIDENT NUMBER: CVA 2014 07 22 03 03

Name no. : 3
Name : ENTERPRISES CORP., GRINTI (PAULA)
Address : s.22

Name Status : OWNER
Phone : s.22

Claims Adjuster Name :
Claims Adjuster Firm :
Claim Number :
Insurance Company :
Policy Number :

LOSS ESTIMATES:

Property Loss : s.21

Content Loss : \$0

Total Loss : s.21

REMARKS:

Name no. : 4
Name : s.22
Address : 0 1165 MAINLAND

Name Status : BUSINESS OCCUPANT
Phone : s.22

Claims Adjuster Name :
Claims Adjuster Firm :
Claim Number :
Insurance Company :
Policy Number :

LOSS ESTIMATES:

Property Loss : \$0

Content Loss : \$0

Total Loss : \$0

REMARKS:

Investigating Officer :
SEREDA, GREGORY

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2575

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