
Location of Incident: **3304 35 AVENUE
VERNON BC**

of Occupants (At time of fire): **25** # of Injured: **0** # of Deaths: **0** Total Dollar Loss Estimate: **s.22**

Related to Wildland Interface Fire: **NO** Property Value: **s.22** Content Value: **\$0** Total Value at Risk: **s.22**

Code Name :	Code Description
PROPERTY COMPLEX :	3200 RESIDENTIAL APARTMENT
PROPERTY CLASSIFICATION :	3240 APARTMENT, TOWNHOUSE 5 TO 20 UNITS WITHOUT BUSINESS
GENERAL CONSTRUCTION :	2000 PROTECTED COMBUSTIBLE CONSTRUCTION WOOD PROTECTED BY PLAST
BUILDING HEIGHT :	0040 4 STORIES ABOVE GRADE
GROUND FLOOR AREA :	3000 501 TO 1000M2 (5383 10764FT2)
YEAR OF CONSTRUCTION :	1975 1975
MANUAL FIRE PROTECTION :	4000 EXTINGUISHER ONLY
OUTSIDE FIRE PROTECTION :	1000 PUBLIC HYDRANT PROTECTION & FIRE DEPARTMENT
SPRINKLER PROTECTION :	7000 NO SPRINKLER PROTECTION
AUTOMATIC FIRE ALARM SYSTE :	2000 FIRE ALARM SYSTEM LOCAL (BUILDING ONLY)
SMOKE ALARM OPERATION :	5000 ALARM ACTIVATED OCCUPANT ACTION UNKNOWN
INITIAL DETECTION :	0000 CANNOT BE DETERMINED
TRANSMISSION OF ALARM :	1000 911
FIRE SERVICE :	3000 COMPOSITE CAREER & VOLUNTEER/PAID ON CALL FIRE DEPARTMENT
INCIDENT :	1000 FIRE FIRE DEPARTMENT ATTENDED
ACTION TAKEN :	3000 EXTINGUISHED BY FIRE DEPARTMENT
METHOD OF FIRE CONTROL :	4300 38MM/42MM (1 1/2"/1 3/4") HOSE 2 OR MORE HAND LINES
FIRE ORIGIN, LEVEL :	4000 2ND STOREY OR OVER 3M TO 6M (10FT TO 20FT) ABOVE GRADE
FIRE ORIGIN, AREA :	2100 SLEEPING UNDER 5 OCCUPANTS INCLUDES PATIENTS' ROOM, BEDR
EXTENT OF FIRE :	6000 EXTENDED BEYOND PROPERTY OF ORIGIN
EXTENT OF DAMAGE :	5000 CONFINED TO BUILDING 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

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WAKEFIELD, DEAN	2528	250 550 3504	2013 04 09

Remarks:

UPON ARRIVAL WE FOUND A FULLY INVOLVED FIRE ON THE A SIDE OF THE STRUCTURE. 3RD FLOOR SUITE WAS ON FIRE AND FIRE WAS LAPPING TO THE FOURTH FLOOR ROOF UNDERHANG. 2ND FLOOR SUITE WAS FULLY INVOLVED. WE ADVANCED THE BLITZ LINE AND CONTROLLED THE LAPPING FROM THE SUITE. HAD s.22 CATCH THE HYDRANT. WE ADVANCED 1 3/4' PRE CONNECT TO THE HIGH RISE PACK AND HAD s.22 AND s.22 ADVANCE TO THE 2ND FLOOR SUITE TO CONTROL THE FIRE. PPV USED AND I CONTROLLED THE LAPPING. FF s.22 ARRIVED AND JOINED A 1. AT THE SAME TIME E 2 ARRIVED WITH 4 AND I HAD THEM SET UP A 4 MAN RIT TEAM. HAD RCMP , BCAS, HYDRO AND GAS DISPATCHED. ESS WAS CONTACTED AND WE STARTED ORGANIZING THE RESIDENTS. FIRE WAS KNOCKED DOWN QUICKLY AND MORE CREWS STARTED TO ARRIVE. PPV EACH FLOOR AND CHECK FOR FIRE EXTENSION. CREW CHECKED WITH TIC AND DID OVERHAUL TO EACH SUITE INVOLVED. RESIDENTS WERE ALLOWED ESCORTED TO THEIR SUITES TO GATHER SOME NECESSITIES. SUITE s.22 WAS WHERE THE FIRE BEGAN, THE BEDROOM BY THE BED APPEARED TO BE THE POINT OF ORIGIN. WEATHER WAS SUNNY AND HOT. C SHIFT CAPT. WALKER OIC. SUITES INVOLVED WERE UNIT s.22 UNIT s.22 RENTER s.22 . PICTURES TAKEN. D/C SKOLROOD DID THE INITIAL INVESTIGATION ON EASTER MONDAY. TUESDAY APRIL 2ND 2013 IS WHEN FIRE INSPECTOR ATTENDED SCENE AND HAD A LOOK AT THE SCENE. DETERMINED THAT FIRE WAS IN THE BEDROOM OF s.22 POINT OF ORIGIN APPEARS TO BE THE END OF THE BED ITSELF. LOTS OF SMOKERS MATERIAL WAS FOUND ALL AROUND BUT ACCORDING TO D/C SKOLROOD THE TENANT STATED TO HIM THAT s.22 . TENANT STATED TO D/C SKOLROOD THAT s.22 THE ELECTRICAL WAS EXAMINED IN THE BEDROOM AND DID NOT FIND ANYTHING TO WARRANT CALLING AN ELECTRICAL INSPECTOR TO ATTEND. D/C SKOLROOD ADVISED THAT THE TENANT 'S MOTHER SIAD s.22 RELAYED THAT THE NEXT DOOR NEIGHBOUR TO HIM IN THE BUILDING ALLEGEDLY HEARD THUMPING SOUNDS COMING FROM s.22 SUITE WHILE s.22 WAS AWAY. THE NEIGHBOUR THOUGHT SOMEONE HAD BEEN IN THE SUITE POSSIBLY. THE INITIAL ATTACK CREWS REPORT THE SUITE DOOR WAS FOUND OPEN UPON THEIR ENTRY INTO THE SUITE. RCMP DID NOT KNOW ANYTHING ABOUT THIS WHEN SPOKE TO THEM. I WAS UNABLE TO IDENTIFY THE SOURCE OF IGNITION OF THIS FIRE. MATTRESS FOR BED WAS TOTALLY BURNED AWAY AND ALL THAT WAS LEFT WAS THE SPRING FRAME ITSELF. THE BEDDING MATERIAL WAS ALSO TOTALLY GONE AS WAS THE PILLOW. THE BED BOX SPRING ASSY WAS BURNED OFF IN THE FOOT OF THE BED ON TWO BOARDS. REMNANTS OF SOME PANTS WERE FOUND ALONG THE SIDE BUT UNKNOWN IF THEY WERE INVOLVED DIRECTLY OR PUT THERE DURING OVERHAUL. A LARGE PILE OF CONTENTS WAS OUTSIDE ON THE LAWN . IT WAS ALL MIXED UP AND THE DEBRIS WAS FROM A NUMBER OF SUITES. COULD NOT RULE OUT WITHOUT A DOUBT THAT SOMEONE ELSE WAS INSIDE SUITE . THIS FIRE IS RULED AS UNDETERMINED CAUSE. RCMP DID ATTEND THE SCENE AT TIME OF FIRE AND TAKE SOME INDIVIDUALS INTO CUSTODY ALLEGEDLY FOR TRESPASSING BEING IN THE BUILDING WHEN NOT SUPPOSED TO BE. REPORTS FROM THE OIC CAPT WALKER WAS THAT WHEN THEY ARRIVED THEY OBSERVED A APERSON GOING FROM BALCONY TO BALCONY ON THE EXTERIOR OF THE BUILDING. COULD NOT GET AN EXACT RCMP FILE NUMBER FOR THIS INCIDENT. UNDETERMINED.

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Name no. : 1
Name :
Address :

Name Status : OCCUPANT
Phone : s.22

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:

PROPERTY MANAGER THAT WAS IN CHARGE OF THE SUITE WHERE THE FIRE OCCURRED IN #s.22 THE OWNER OF THE SUITE IS s.22 WHO RESIDES IN s.22 THE TENANT WHO RENTED THE SUITE IS s.22

Name no. : 2
Name :
Address :

Name Status : BUSINESS OWNER
Phone : s.22

s.22

Claims Adjuster Name : 1. TAYLOR , DAVE
Claims Adjuster Firm : 1. CRAWFORD ADJUSTERS
Claim Number : 1. s.22
Insurance Company : 1. WAWANESA AND ECONOMICAL
Policy Number : 1 s.22

LOSS ESTIMATES:

Property Loss : s.22

Content Loss : \$0

Total Loss : s.22

REMARKS:

PROPERTY MANAGER WHO LOOKED AFTER THE STRATA OWNED SUITES WITHIN THE BUILDING. HE IS THE REPRESENTATIVE FOR THE BUILDING OWNER(S). s.22 IS LOSS FIGURE PROVIDED FOR THE BUILDING LOSS AMOUNT . DAVE TAYLOR THE ADJUSTER FOR THE BUILDING PROVIDED THIS FIGURE.

Investigating Officer : LAFB Badge #
WAKEFIELD, DEAN : 2528

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Name no. : 3
Name :
Address : **s.22**

Name Status : OWNER
Phone : **s.22**

Claims Adjuster Name : 1. TAYLOR , DAVE
Claims Adjuster Firm : 1. CRAWFORD AND CO. ADJUSTERS
Claim Number : 1 **s.22**
Insurance Company : 1. ECONOMICAL AND WAWANESA
Policy Number : 1. **s.22**

LOSS ESTIMATES:

Property Loss : **s.22** Content Loss : \$0 Total Loss : **s.22**

REMARKS:

OWNER OF THE SUITE #**s.22** WHERE THE FIRE OCCURRED. UNKNOWN WHO HIS INSURANCE IS THROUGH FOR THE ACTUAL SUITE. **s.22** . THE SUITE
COULD BE COVERED UNDER THE BUILDING INSURANCE POLICY.

Name no. : 4
Name : **s.22**
Address : **s.22** 3304 35 AVENUE
VERNON BRITISH COLUMBIA

Name Status : OWNER
Phone : **s.22**

Claims Adjuster Name : 1. SMITH , TONY
Claims Adjuster Firm : 1. CLAIMS PRO
Claim Number : 1. **s.22**
Insurance Company : 1. WAWANESA
Policy Number : 1. **s.22**

LOSS ESTIMATES:

Property Loss : \$0 Content Loss : \$0 Total Loss : \$0

REMARKS:

OWNER OF UNIT **s.22** AND THERE WAS A TENANT IN THE UNIT. THE UNIT **s.22** HAS SMOKE DAMAGE . UNKNOWN THE TOTAL DAMAGE LOSS

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Name no. : 5
Name : s.22
Address : s.22 3304 35 AVENUE
VERNON BRITISH COLUMBIA

Name Status : OWNER
Phone : s.22

Claims Adjuster Name : 1. SMITH , TONY
Claims Adjuster Firm : 1. CLAIMS PRO
Claim Number : 1 s.22
Insurance Company : 1. WAWANESA
Policy Number : 1. s.22

LOSS ESTIMATES:
Property Loss : \$0 Content Loss : \$0 Total Loss : \$0

REMARKS:

OWNER OF UNIT s.22 THAT SUFFERED WATER DAMAGE AND CONTENTS . UNKNOWN THE TOTAL LOSS FOR DAMAGES.

Name no. : 6
Name : s.22
Address : s.22 3304 35 AVENUE
VERNON BRITISH COLUMBIA

Name Status : OWNER
Phone :

Claims Adjuster Name : 1. SMITH , TONY
Claims Adjuster Firm : 1. CLAIMS PRO
Claim Number : 1. s.22
Insurance Company : 1. WAWANESA
Policy Number : 1. s.22

LOSS ESTIMATES:
Property Loss : \$0 Content Loss : \$0 Total Loss : \$0

REMARKS:

OWNER OF SUITE s.22 THAT SUFFERED SMOKE DAMAGE. UNKNOWN THE DOLLAR LOSS AMOUNT.

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Name no. : 7
Name : s.22
Address : s.22 3304 35 AVENUE
VERNON BRITISH COLUMBIA

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:

OCCUPANT OF s.22 WHERE THE FIRE OCCURRED. HE WAS NOT HOME AT THE TIME OF THE FIRE. s.22
s.22

Name no. : 8
Name : s.22
Address :

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:

CALLER WHO CALLED 9 1 1 TO REPORT THE FIRE.

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