PROVINCE OF BRITISH COLUMBIA Ministry of Justice Emergency Management BC / Office of the Fire Commissioner			FIRE REPORT - STRUCTURE		
		er	INCIDENT NUMBER: CCQ 2012 08 05 01 06		
Location of Incident:	3466 DAR COQUITL		E		
# of Occupants (At time of fire): 2	# of Injured: 0	# of D	Deaths: 0	Total D	ollar Loss Estimate: \$ <a blue;"="" color:="" href="style=">S.22</a>
Related to Wildland Interface Fire: NO	Property Value: \$	s.22	Content Val	ue: \$ <mark>s.22</mark>	Total Value at Risk: \$ s.22
Code Name	: Code Desc	ription			
PROPERTY COMPLEX	: 3400 RESIDENT	TIAL - SI	NGLE DETAC	CHED	
PROPERTY CLASSIFICATION	: 3110 YEAR-RO	UND USI	E DWELLING	- 1-FAMILY	
GENERAL CONSTRUCTION	: 2000 PROTECT	ED COM	BUSTIBLE CO	ONSTRUCTIC	N - WOOD PROTECTED BY PLAST
BUILDING HEIGHT	: 0000 CANNOT	BE DETE	RMINED		
GROUND FLOOR AREA	: 0000 CANNOT I	BE DETE	RMINED		
YEAR OF CONSTRUCTION	: 0000 CANNOT I	BE DETE	RMINED		
MANUAL FIRE PROTECTION	: 4000 EXTINGU	ISHER O	NLY		
OUTSIDE FIRE PROTECTION	: 1000 PUBLIC H	YDRAN	F PROTECTIC	ON & FIRE DE	PARTMENT
SPRINKLER PROTECTION	: 7000 NO SPRIN	KLER PF	ROTECTION		
AUTOMATIC FIRE ALARM SYSTE	: 0000 CANNOT	BE DETE	RMINED		
SMOKE ALARM OPERATION	: 0000 ALARM O	PERATIO	ON CANNOT	BE DETERMI	NED
INITIAL DETECTION	: 7000 VISUAL S	IGHTINC	GOR OTHER	MEANS OF PI	ERSONAL DETECTION (E.G. S
TRANSMISSION OF ALARM	: 1000 911				
FIRE SERVICE	: 3000 COMPOSI	ΓE - CAR	EER & VOLU	JNTEER/PAID	-ON-CALL FIRE DEPARTMENT

ACTION TAKEN : 1000 EXTINGUISHED BY OTHER THAN FIRE DEPARTMENT (I.E OCCUPANT/W
METHOD OF FIRE CONTROL: 1900 HAND FIRE EXTINGUISHER - UNCLASSIFIED (DESCRIBE)

FIRE ORIGIN, LEVEL	: 3000 GROUND	FLOOR, GRADE LEVEL O	OR GRADE TO 3M (10FT)

INCIDENT : 1000 FIRE - FIRE DEPARTMENT ATTENDED

FIRE ORIGIN, AREA : 9900 OUTSIDE AREA - UNCLASSIFIED (DESCRIBE)

EXTENT OF FIRE : 2000 CONFINED TO PART OF ROOM/AREA OF ORIGIN

EXTENT OF DAMAGE : 2000 CONFINED TO PART OF ROOM/AREA OF ORIGIN

IGNITING OBJECT : 5900 ELECTRICAL DISTRIBUTION EQUIPMENT - UNCLASSIFIED (DESCRIBE)

FUEL OR ENERGY : 6000 ELECTRICITY

FORM OF HEAT : 0000 CANNOT BE DETERMINED

MATERIAL FIRST IGNITED : 0000 CANNOT BE DETERMINED

ACT OR OMISSION : 4900 MECHANICAL/ELECTRICAL FAILURE/MALFUNCTION - UNCLASSIFIED (DE

Investigating Officer HICKS, DENISE LAFC Badge # 2311 
 Telephone
 ReportDate

 604-927-6400
 2012-08-14

## **Remarks:**

CREW RESPONDED TO A REPORT OF A FIRE AT THE ELECTRICAL METER OUTSIDE OF 3466 DARWIN AVENUE, COQUITLAM. THE FIRE APPEARED TO HAVE STARTED IN THE VICINITY OF THE ELECTRICAL METER AND THE FIRE ALSO CAUSED DAMAGE TO THE SIDING. THE RESIDENT EXTINGUISHED THE FIRE USING A HAND-HELD EXTINGUISHER PRIOR TO CREW ARRIVAL. THE RESIDENT ALSO SHUT OFF THE POWER TO THE RESIDENCE. THE CREW CHECKED THE RESIDENCE WITH A TIC, AND NO EVIDENCE OF FIRE EXTENSION WAS FOUND. BC HYDRO WAS NOTIFIED AND RESPONDED TO THE SCENE AS WELL. THE METER HAD BEEN REPLACED WITH A SMART METER WITHIN THE PAST TWO WEEKS. HYDRO CUT THE POWER TO THE HOME AT THE POLE, AND THE SCENE WAS LEFT IN THEIR CARE. THE HOMEOWNER ADVISED THAT THE DAMAGE WAS CONTAINED TO THE METER, WITH A LITTLE BIT OF DAMAGE TO THE PAINT/SIDING. THERE WAS NO EXTENSION TO ANY WIRING, AND NO STRUCTURAL DAMAGE. ACCORDING TO THE HOMEOWNER, BC HYDRO IS COVERING THE DAMAGES. THERE IS NO INSURANCE CLAIM FILED.

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FIRE REPORT - STRUCTURE (NARRATIVE)

INCIDENT NUMBER: CCQ 2012 08 05 01 06

PROVINCE OF BRITISH COLUMBIA Ministry of Justice Emergency Management BC / Office of the Fire Commissioner		FIRE REPORT - STRUCTURE (NAMES) INCIDENT NUMBER: CCQ 2012 08 05 01 06		
Claims Adjuster Name Claims Adjuster Firm Claim Number Insurance Company Policy Number				
LOSS ESTIMATES: Property Loss : \$ <mark>s.22</mark>	Content Loss : \$0	Total Loss : \$ <mark>s.22</mark>		
REMARKS:				
Name no. Name Address	: 2 : <b>s.22</b> : 0 3466 DARWIN AVENUE V3B3H6	Name Status : OCCUPANT Phone : <u>s.22</u>		
Claims Adjuster Name Claims Adjuster Firm Claim Number Insurance Company Policy Number				
LOSS ESTIMATES: Property Loss : \$0	Content Loss: \$0	Total Loss: \$0		
REMARKS:				

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PROVINCE OF BRITISH COLUMBIA Ministry of Justice Emergency Management BC / Office of the Fire Commissioner		FIRE REPORT - <b>STRUCTURE</b> (NAMES) INCIDENT NUMBER: <b>CCQ 2012 08 05 01 06</b>		
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. Name	:4 : s.22	Name Status : WITNESS Phone :		
Address	:0			
Claims Adjuster Name Claims Adjuster Firm Claim Number Insurance Company Policy Number				
LOSS ESTIMATES: Property Loss : \$0	Content Loss: \$0	Total Loss: \$0		
REMARKS:				

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Incident Report