

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

## FIRE REPORT - STRUCTURE

INCIDENT NUMBER: CCH 2015 01 07 00 01

Location of Incident: **45200 MOODY AVENUE  
CHILLIWACK BC**

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

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

**Code Name :      Code Description**

PROPERTY COMPLEX : 3400 RESIDENTIAL - SINGLE DETACHED  
PROPERTY CLASSIFICATION : 3110 YEAR-ROUND USE DWELLING - 1-FAMILY  
GENERAL CONSTRUCTION : 2000 PROTECTED COMBUSTIBLE CONSTRUCTION - WOOD PROTECTED BY PLAST  
BUILDING HEIGHT : 0020 2 STORIES ABOVE GRADE  
GROUND FLOOR AREA : 2000 101 TO 500M2 (1077 - 5382FT2)  
YEAR OF CONSTRUCTION : 1973 1973  
MANUAL FIRE PROTECTION : 7000 NO MANUAL FIRE PROTECTION  
OUTSIDE FIRE PROTECTION : 1000 PUBLIC HYDRANT PROTECTION & FIRE DEPARTMENT  
SPRINKLER PROTECTION : 7000 NO SPRINKLER PROTECTION  
AUTOMATIC FIRE ALARM SYSTE : 1000 NO FIRE ALARM SYSTEM  
SMOKE ALARM OPERATION : 9500 ALARM NOT ACTIVATED - UNKNOWN  
INITIAL DETECTION : 7000 VISUAL SIGHTING OR OTHER MEANS OF PERSONAL DETECTION (E.G. S  
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 : 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 : 7500 WALL ASSEMBLY - INCLUDES CONCEALED WALL SPACE  
EXTENT OF FIRE : 4000 CONFINED TO FLOOR LEVEL OF ORIGIN  
EXTENT OF DAMAGE : 4000 CONFINED TO FLOOR LEVEL OF ORIGIN  
IGNITING OBJECT : 0000 CANNOT BE DETERMINED  
FUEL OR ENERGY : 6000 ELECTRICITY  
FORM OF HEAT : 0000 CANNOT BE DETERMINED  
MATERIAL FIRST IGNITED : 4100 WOOD - INCLUDES BOX, BARREL, CASE, FINISHED LUMBER, PLYWOOD.  
ACT OR OMISSION : 4100 PART FAILURE, LEAK, BREAK

Investigating Officer      LAFC Badge #  
BASTEN, HARRY      1701

Telephone      ReportDate  
604-792-8713      2015-01-07

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

FIRE REPORT - **STRUCTURE** (NARRATIVE)

INCIDENT NUMBER: **CCH 2015 01 07 00 01**

---


**Remarks:**

2015-0060. REPORT OF A RESIDENTIAL STRUCTURE FIRE. DISPATCH UPDATE, REPORTS OF AN EXPLOSION. E1 ON SCENE, NOTHING SHOWING, TWO STOREY TYPE 5 RESIDENTIAL HOME. NEIGHBOUR REPORTS A FIRE AND ELECTRICAL METER EXPLODED ON THE BRAVO SIDE OF THE HOME. ELECTRICAL METER TOTALLY CONSUMED, LITTLE REMAINED OF THE METER. NEIGHBOUR ATTEMPTING TO EXTINGUISH A FIRE IN THE STACKED FIREWOOD WITH A GARDEN HOSE. NEIGHBOUR REPORTS HE CHECKED THE HOME, NO ONE HOME AT THIS TIME. ONE 1 3/4' HOSELINE USED TO EXTINGUISH AND OVERHAUL THE FIRE ON THE EXTERIOR OF THE HOME. SEARCH TEAM ENTERED THE HOME, REPORT A LIGHT SMOKE CONDITION. PPV SET TO VENTILATE. PRIMARY & SECONDARY SEARCHES ALL CLEAR. TIC SHOWS HIGH HEAT IN THE EXTERIOR WALL BY THE ELECTRICAL PANEL, IN THE BASEMENT. RIT ESTABLISHED. BRAVO WALL OPENED UP AND FIRE EXTINGUISHED WITH PSI WATER EXTINGUISHER & OVERHAULED. BC HYDRO ATTENDED TO DISCONNECT THE POWER TO THE HOME.

---

Investigating Officer  
BASTEN, HARRY

LAFC Badge #  
1701

Telephone  
604-792-8713 

ReportDate  
2015-01-07

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

FIRE REPORT - **STRUCTURE** (NAMES)INCIDENT NUMBER: **CCH 2015 01 07 00 01**

Name no. : 1  
Name : **s.22**  
Address : 45200 MOODY AVENUE  
CHILLIWACK BRITISH COLUMBIA

Name Status : OWNER  
Phone :

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

LOSS ESTIMATES:  
Property Loss : **s.22**

Content Loss : **s.22**Total Loss : **s.22**

REMARKS:

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

Name Status : WITNESS  
Phone :

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

LOSS ESTIMATES:  
Property Loss : **s.**

Content Loss : **s.**Total Loss : **s.**

REMARKS:

Investigating Officer : LAFB Badge #  
BASTEN, HARRY : 1701

Telephone : 604-792-8713  
ReportDate : 2015-01-07

