

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

FIRE REPORT - **STRUCTURE**INCIDENT NUMBER: **CRI 2018 10 24 11 07**

Location of Incident: **10500 MILFORD DR
 RICHMOND BC**

of Occupants (At time of fire): **4** # of Injured: **1** # of Deaths: **0** Total Dollar Loss Estimate: **\$0**

Related to Wildland Interface Fire: **NO** Property Value: **\$1,602,200** Content Value: **\$0** Total Value at Risk: **\$1,602,200**

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 :	1974 1974
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 :	1000 CAREER FIRE DEPARTMENT ONLY
INCIDENT :	1000 FIRE - FIRE DEPARTMENT ATTENDED
ACTION TAKEN :	1000 EXTINGUISHED BY OTHER THAN FIRE DEPARTMENT (I.E.. OCCUPANT/W
METHOD OF FIRE CONTROL :	3200 WATER BUCKET
FIRE ORIGIN, LEVEL :	4000 2ND STOREY OR OVER 3M TO 6M (10FT TO 20FT) ABOVE GRADE
FIRE ORIGIN, AREA :	3100 KITCHEN, COOKING AREA
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 :	1020 STOVE, RANGE, TOP BURNER AREA - INVOLVING FIRE IN PAN, WOK
FUEL OR ENERGY :	6000 ELECTRICITY
FORM OF HEAT :	2000 SPARK, ELECTRICAL - INCLUDES ARC, DISCHARGE. (EXCLUDES STATI
MATERIAL FIRST IGNITED :	5610 VEGETABLE OIL - INCLUDES MARGARINE
ACT OR OMISSION :	6300 LACK OF MAINTENANCE

Investigating Officer
 WHITTY, ROBERT

LAFB Badge #

Telephone
 604-278-5131

ReportDate
 2018-12-24

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FIRE REPORT - **STRUCTURE**
(PRODUCT/EQUIPMENT)
INCIDENT NUMBER: **CRI 2018 10 24 11 07**

LOG #	: 178385		
ITEM TYPE	: AC ADAPTER POWER SUPPLY		
ITEM DESCRIPTION	:		
MAKE	: WHIRLPOOL	CERT. AGENCY1	:
MODEL	: WGE32000	CERT. AGENCY2	:
YEAR	:	CERT. AGENCY3	:
LICENSE NO.	:	CERT. AGENCY4	:
SERIAL NO.	: IMK0178043	CERT. AGENCY5	:
MAKE	: WHIRLPOOL		

COMMENTS :

Investigating Officer	L AFC Badge #	Telephone	ReportDate
WHITTY, ROBERT		604-278-5131	2018-12-24

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FIRE REPORT - **STRUCTURE** (NARRATIVE)

INCIDENT NUMBER: **CRI 2018 10 24 11 07**

Remarks:

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FIRE REPORT - **STRUCTURE** (NAMES)INCIDENT NUMBER: **CRI 2018 10 24 11 07**

Name no. : 1
Name : s.22
Address : 0 SAME AS ABOVE
V7A4J7

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 :

Name Status : OWNER
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 : LAFC Badge #
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FIRE REPORT - **STRUCTURE** (NAMES)INCIDENT NUMBER: **CRI 2018 10 24 11 07**

Name no. : 3
Name : **s.22**
Address : 0 10500 MILFORD DRIVE
V7A4J7

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:

Name no. : 4
Name : **s.22**
Address : 0 10500 MILFORD DR
V7A4J7

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:

Investigating Officer : LAFC Badge #
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FIRE REPORT - **STRUCTURE** (NAMES)INCIDENT NUMBER: **CRI 2018 10 24 11 07**

Name no. : 5
Name : **s 22**
Address : 0 10500 MILFORD DR
V7A4J7

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:

Investigating Officer : LAFC Badge #
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FIRE REPORT - **STRUCTURE** (CASUALTY)

INCIDENT NUMBER: **CRI 2018 10 24 11 07**

CASUALTY NO : 1
NAME : **s.22**
ADDRESS : 0 10500 MILFORD DRIVE
V7A4J7

AGE **s.**
GENDER : F
STATUS : CIVILIAN
DATE OF DEATH :

Code Name : Code Description

NATURE OF CASUALTY : 003 - MINOR INJURY (LESS THAN ONE DAY HOSPITAL OR OFF WORK)
CONDITION OF CASUALTY : 014 - AWAKE OR NO PHYSICAL OR MENTAL IMPAIRMENT AT TIME OF FI
ACTION OF CASUALTY : 026 - LOSS OF JUDGEMENT OR PANIC
IGNITION OF CLOTHING : 030 - NOT APPLICABLE
TYPE OF FABRIC IGNITED : 040 - NOT APPLICABLE
CAUSE OF FAILURE TO ESCAPE : 059 - UNCLASSIFIED OR NOT APPLICABLE
CAUSE OF INJURY/DEATH : 101 - BURNS RESULTING FROM FIRE AND FLAMES

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