

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

FIRE REPORT - STRUCTURE

INCIDENT NUMBER: CCH 2015 10 31 11 02

Location of Incident: **219 - 46095 BOLE AVE
CHILLIWACK BC**

of Occupants (At time of fire): **156** # of Injured: **0** # of Deaths: **0** Total Dollar Loss Estimate: s.21

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

Code Name : Code Description

PROPERTY COMPLEX : 3200 RESIDENTIAL - APARTMENT
PROPERTY CLASSIFICATION : 3250 APARTMENT, TOWNHOUSE - OVER 20 UNITS WITH OR W/O BUSINESS
GENERAL CONSTRUCTION : 2000 PROTECTED COMBUSTIBLE CONSTRUCTION - WOOD PROTECTED BY PLAST
BUILDING HEIGHT : 0040 4 STORIES ABOVE GRADE
GROUND FLOOR AREA : 4000 1001 TO 2500M2 (10765 - 26910FT2)
YEAR OF CONSTRUCTION : 1973 1973
MANUAL FIRE PROTECTION : 2000 EXTINGUISHERS & STANDPIPE SYSTEM
OUTSIDE FIRE PROTECTION : 1000 PUBLIC HYDRANT PROTECTION & FIRE DEPARTMENT
SPRINKLER PROTECTION : 5000 PARTIAL SPRINKLER PROTECTION - LOCAL ALARM, WATCHPERSON
AUTOMATIC FIRE ALARM SYSTE : 2000 FIRE ALARM SYSTEM - LOCAL (BUILDING ONLY)
SMOKE ALARM OPERATION : 1000 ALARM ACTIVATED - ASSISTED OCCUPANT(S) IN EVACUATING
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 : 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 : 3000 CONFINED TO ROOM 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 : 3300 CLOTHING - SYNTHETIC FIBRE - INCLUDES MIXED FIBRES
ACT OR OMISSION : 0000 CANNOT BE DETERMINED

Investigating Officer	L AFC Badge #	Telephone	ReportDate
DAVIES, ERIC	1906	604-792-8713	2015-11-27

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FIRE REPORT - **STRUCTURE** (NARRATIVE)

INCIDENT NUMBER: **CCH 2015 10 31 11 02**

Remarks:

E-1 ON SCENE WITH BELLS RINGING AND THE BUILDING PARTIALLY EVACUATED. MANAGER INDICATED AND FIRE IN UNIT #219 WITH HEAVY SMOKE TO THE FLOOR. WALK AROUND SHOWED MEDIUM GREY SMOKE SHOWING FROM THE 2ND FLOOR 'C' SIDE. ASSISTED A GROUP OF OCCUPANTS OUT OF THE WEST STAIRWELL AND OUTSIDE SO WE COULD SET UP FIRE ATTACK AT THAT ENTRANCE. RCMP PROVIDED TRAFFIC CONTROL AROUND THE SCENE AND CROWD CONTROL MOVING OCCUPANTS UP THE STREET TOWARD THE FRONT ENTRANCE. BCAS SET UP IN STAGING. PPP WAS SET UP TO PRESSURIZE THE HALL, INITIAL INVESTIGATION SHOWED UNIT #219 FULL OF MEDIUM GREY SMOKE. APT. PAC CONNECTED TO THE STANDPIPE ON THE SECOND FLOOR. CREWS CONNECTED E-4 TO THE FDC AND GOT READY TO ESTABLISH A WATER SUPPLY. L-1 SET UP SECOND MEANS OF EGRESS ON 'C' SIDE, GROUND LADDER TO THE SECOND FLOOR BALCONY AND FLEW THE BUCKET. RIT ESTABLISHED ON THE 'A' SIDE. CREWS ENTERED THE SUITE, DID A PRIMARY SEARCH AND KNOCKED THE FIRE DOWN. UNIT WAS VENTED WITH PPV. SECONDARY SEARCH COMPLETED BY A SECOND CREW. UNIT #319, PRIMARY SEARCH AND VENTED LIGHT SMOKE. UNIT #119, SALVAGE CREW ENTERED AND DEALT WITH A SMALL AMOUNT OF WATER COMING FROM THE W.C. LIGHT FIXTURE. SHUT POWER OFF AT THE BREAKER. UNIT #320, MADE CONTACT WITH AND EVACUATED AN OCCUPANT WHO HAD BEEN COMMUNICATING WITH CREWS FROM THE BALCONY. s.22

UNIT #120, ENTERED AND SHUT OFF A CURLING IRON THAT HAD BEEN LEFT ON. ALL UNITS WERE EITHER UNLOCKED OR ENTERED WITH KEYS FROM THE MANAGER. (NO DOORS WERE FORCED.) HYDRO DISCONNECTED POWER TO UNIT #219 AT THE METER BASE. s.22

s.22

INVESTIGATION WAS INCONCLUSIVE, WINDOWS AND

DOOR WERE LOCKED AND THE SCENE LEFT WITH RCMP.

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FIRE REPORT - **STRUCTURE** (NAMES)INCIDENT NUMBER: **CCH 2015 10 31 11 02**

Name no. : 1
Name : UNKNOWN, UNKNOWN
Address : 0

Name Status : BUSINESS OWNER
Phone :

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

LOSS ESTIMATES:

Property Loss : s.21

Content Loss : s.21

Total Loss : s.21

REMARKS:

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

Name Status : OCCUPANT
Phone :

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

LOSS ESTIMATES:

Property Loss : \$0

Content Loss : s.22

Total Loss : s.22

REMARKS:

Investigating Officer : LAFB Badge #
DAVIES, ERIC : 1906

Telephone :
604-792-8713
ReportDate :
2015-11-27

