

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

## FIRE REPORT - STRUCTURE

INCIDENT NUMBER: **DNC 2014 11 30 13 01**

Location of Incident:

**2855/2857 OAK STREET  
NORTH COWICHAN BC V0R 1K1**

# of Occupants (At time of fire): **6**      # 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 : 3900 RESIDENTIAL - WITH BUSINESS/MERCANTILE, UP TO 3 STORIES  
PROPERTY CLASSIFICATION : 3290 APARTMENT, TOWNHOUSE - UNCLASSIFIED (DESCRIBE)  
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 : 0066 1966 TO 1968  
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 : 1000 ALARM ACTIVATED - ASSISTED OCCUPANT(S) IN EVACUATING  
INITIAL DETECTION : 1000 SMOKE ALARM DEVICE  
TRANSMISSION OF ALARM : 1000 911  
FIRE SERVICE : 2000 VOLUNTEER/PAID-ON-CALL FIRE DEPARTMENT ONLY  
INCIDENT : 1000 FIRE - FIRE DEPARTMENT ATTENDED  
ACTION TAKEN : 3000 EXTINGUISHED BY FIRE DEPARTMENT  
METHOD OF FIRE CONTROL : 4700 COMBINATIONS OF 38/42MM (1 1/2"/1 3/4"), 65MM (2 1/2"), 7  
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 : 4000 CONFINED TO FLOOR LEVEL OF ORIGIN  
EXTENT OF DAMAGE : 5000 CONFINED TO BUILDING OF ORIGIN  
IGNITING OBJECT : 2300 STATIONARY SPACE HEATER - INCLUDES WALL FURNACE, UNIT HEATER  
FUEL OR ENERGY : 6000 ELECTRICITY  
FORM OF HEAT : 6000 HOT OBJECT - DIRECT HEAT BY CONDUCTION OR RADIATION, NO DIRE  
MATERIAL FIRST IGNITED : 2700 DRAPERY - INCLUDES CURTAIN, BLIND, TAPESTRY  
ACT OR OMISSION : 3700 COMBUSTIBLE PLACED TOO CLOSE TO HEAT

Investigating Officer  
CLARK, ROBERT

LAFC Badge #  
999

Telephone  
250-746-3108

ReportDate  
2014-12-10

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FIRE REPORT - **STRUCTURE** (NARRATIVE)

INCIDENT NUMBER: **DNC 2014 11 30 13 01**

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**Remarks:**

CODE 3290 - 1 RESIDENCE WITH BUSINESS. THE FIRE ORIGINATED IN THE BEDROOM OCCUPIED BY s.22 . S. WAS WORKING IN THE DOWNSTAIRS RESTAURANT WHEN THE FIRE OCCURRED. THE FIRE ORIGINATED WHEN THE DRAPES COVERING THE SLIDING GLASS DOORS IGNITED. THE DRAPES WERE OVER SIZED AND PUDDLED AT THE BOTTOM COVERING THE ELECTRIC IN FLOOR HEATER. THE PUDDLING OF THE DRAPES RESTRICTED THE HEAT DISPERSEMENT AND CAUSED THE HEAT TO BE TRANSFERRED TO THE DRAPES WHICH EVENTUALLY LED TO IGNITION.

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FIRE REPORT - **STRUCTURE** (NAMES)INCIDENT NUMBER: **DNC 2014 11 30 13 01**

Name no. : 1  
Name : **s.22**  
Address :

Name Status : OWNER  
Phone :

Claims Adjuster Name : 1. MILLER , KEN  
Claims Adjuster Firm : 1. INTACT  
Claim Number :  
Insurance Company : 1. INTACT  
Policy Number :

## LOSS ESTIMATES:

Property Loss : **s.22**

Content Loss : \$0

Total Loss : **s.22**

REMARKS:

Name no. : 2  
Name : **s.22**  
Address : 2857 OAK STREET  
CHEMAINUS BRITISH COLUMBIA V0R 1K1

Name Status : BUSINESS OWNER  
Phone : 250-416-0338

Claims Adjuster Name : 1. CARLSON , KIM  
Claims Adjuster Firm : 1. AIA  
Claim Number :  
Insurance Company : 1. PEACE HILLS  
Policy Number : **s.22**

## LOSS ESTIMATES:

Property Loss : \$0

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

REMARKS:

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

INCIDENT NUMBER: **DNC 2014 11 30 13 01**

Name no. : 3  
Name : s.22  
Address : 2855 OAK STREET  
CHEMAINUS BRITISH COLUMBIA V0R 1K1

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:

BOARDER - REPORTED FIRE - NO CONTENT INSURANCE.

Name no. : 4  
Name : s.22  
Address : 2855 OAK STREET  
CHEMAINUS BRITISH COLUMBIA V0R 1K1

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:

NO CONTENT INSURANCE, s.22

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FIRE REPORT - **STRUCTURE** (NAMES)

INCIDENT NUMBER: **DNC 2014 11 30 13 01**

Name no. : 5  
Name : s.22  
Address : 2855 OAK STREET  
CHEMAINUS BRITISH COLUMBIA V0R 1K1

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:

NO CONTENT INSURANCE s.22

Name no. : 6  
Name : s.22  
Address : 2855 OAK STREET  
CHEMAINUS BRITISH COLUMBIA V0R 1K1

Name Status : OCCUPANT  
Phone :

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

LOSS ESTIMATES:

Property Loss : \$0

Content Loss : \$0

Total Loss : \$0

REMARKS:

s.22

Investigating Officer : LAFB Badge #  
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FIRE REPORT - **STRUCTURE** (NAMES)

INCIDENT NUMBER: **DNC 2014 11 30 13 01**

Name no. : 7  
Name : **s.22**  
Address : 2855 OAK STREET  
CHEMAINUS BRITISH COLUMBIA V0R 1K1

Name Status : OWNER  
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:

BUSINESS OWNER AND OWNER OF ROOM WHERE FIRE OCCURRED. NO CONTENT INSURANCE.

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