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INCIDENT	
Fire Department:	Garden Grove Fire Department
Incident Number:	G1510341
Exposure Number:	00
Multi-Agency IC#:	15-090903 00262265
Incident Date:	09/09/15
Dispatch Time:	15:31:11
Arrival Time:	15:35:28
Controlled Time:	15:46:44
Ending Time:	19:38:00
First-In Company:	
District	G2317
Incident Type:	
Mutual Aid:	Mutual aid received
Method of Alarm:	W911
Type of Weather:	
Air Temperature	100
Address, CSZ:	12161 MAGNOLIA ST
Census Tract:	
Fire Haz Sev Zone:	Medium
RESOURCES & CASUALTIES	
Actions Taken 1:	Fire control or extinguishment, other
Actions Taken 2:	Salvage & overhaul
Actions Taken 3:	Extinguishment by fire service personnel
#Apparatus Resp Engine:	4
#Apparatus Resp Trk:	0
#Apparatus Resp Med:	1
#Apparatus Resp Oth:	8
Fire Svs Injury:	0
Fire Svs Fatal:	0
Non-FS Injury:	1
Non-FS Fatal:	0
PROPERTY & STUDIES	
Property Losses:	\$80,000
Content Losses:	\$40,000
Property Value:	~ 4 0 , 0 0 0
Contents Value:	
Insurance Co:	
Building Ins:	
25 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	

Residential, other

Mixed Prop Use: Property Use:

Detector

Hazmat Rel:

None

Critical Inc: Special Studies:

FIRE/ EXPLOSION SITUATION

Residential Units:

Bldqs. Involved:

Acres Burned:

On-Site Mat/Stor:

Undetermined Area of Origin Undetermined Heat Source: First Item: Undetermined

Confined to Object:

Material Type:

Factor Causing: Cause under investigation

Contributing Factors 1: Fire spread or control, other

Contributing Factors 2:

Human Factor Cont 1: Asleep

Human Factor Cont 2:

Human Factor Cont 3:

Age Sex

Equip Involved:

Undetermined

Equip Brand:

Equip Model:

Equip Serial Number:

Equip Year:

Equip Power Source: Other power source

Equip Portability: Stationary

Mobile Prop Inv:

Mobile Prop Type:

Mobile Prop Make:

Mobile Prop Model:

Mobile Prop Year:

Mobile Prop Lic. Plate:

Mobile Prop Lic. State:

Mobile Prop VIN Number:

Mobile Prop Stolen?:

Suppression Factors:

STRUCTURE FIRE

Type: Status: Enclosed building

# St Above Grnd: Occupied and operating # St Below Grnd: 2

### INCIDENT REPORT

Main Floor Size: 0 Fire Origin: 800 Extent of Flame: Undetermined

Number of Stories DamageConfined to floor of origin

Minor: Sign: Heavy; Extreme:

Auto Ext Sys: None Present

AES Type:

AES Operation: # Sprinkler Heads: AES Failure Reason:

Detectors: Present Detector Type:

Det. Power Supply:

Det. Operation:

Detector operated

Alerted occupants, occupants responded

Agency Name:

#### ARSON

Address: City: State: Zip: Phone: Their Case No. Their ORI: Their FID: Their FDID: Case Status: Avail of Mat: Motivation Factors 1: Motivation Factors 2: Motivation Factos 3: Group Involvement 1: Group Involvement 2: Group Involvement 3: Entry Method: Extent of Fire: Container: Ignit Device: Fuel: Other Inv Info 1: Other Inv Info 2: Other Inv Info 3: Property Ownership:

Int Observations 1:

Int Observations 2: Int Observations 3: Lab Used 1: Lab Used 2: Lab used 3: ARSON COMMENTS BASED UPON FIRE SCENE EXAMINATION AND WITNESS STATEMENTS, IT IS THE CONCLUSION OF THIS FIRE INVESTIGATOR THAT THE FIRE ORIGINATED AT THE BOTTOM OF THE EXTERIOR STAIRCASE, AND THE MOST PROBABLE CAUSE OF IGNITION WAS IMPROPER DISPOSAL OF SMOKING MATERIAL. THIS FIRE IS RULED AS ACCIDENTAL. THIS INVESTIGATATION IS CLOSED CAPTAIN STROHM PATIENT REPORT Name Unknown (OC-MEDS Import) DOB, Age, Sex 36 Female Address, CSZ: Country: Telephone: Driver's Lic#: SS Number:

Country:
Telephone:
Driver's Lic#:
SS Number:
Employer:
Emp Phone:
Relative:
Rel Phone:
Insurance:
Police #:
Billing Care:
Status:
Transported To:
Transported By:
ALS Intervention:

Escorted:
Procedures Used 1:

No treatment

Procedures Used 2: Procedures Used 3: Arrived Date:

Transport Date:

Assessment: Trauma

Other Factors: Human Factors 1: Human Factors 2: Human Factors 3:

Cause of Injury: Fall

Body Site of Injury 1:
Body Site of Injury 2:
Body Site of Injury:
Safety Equipment:
Cardiac Arrest:
CA Prearrival:
CA Init Rhythm:
Initial Care Level:
Highest Care Level:
Patient Status:
Pulse on Transfer:
Disposition:

# COMMENTS

\*\*\*\*\* GE2 \*\*\*\*

STRUCTURE FIRE- 2 STORY APARTMENT BUILDING GE2, GE5, CE46, CT64, GT1, GE1, GM1, GB1

GE2 RESPONDED TO 12161 MAGNOLIA ON A STRUCTURE FIRE. GE2 STATED A 2 STORY APARTMENT BUILDING WITH HEAVY SMOKE SHOWING FROM THE SECOND FLOOR. GE2 WENT IN THE ATTACK MODE AND INITIATED A PRIMARY SEARCH. GE2 ALSO REQUESTED THE SECOND IN UNIT TO COMPLETE THE WATER SUPPLY. GE2 THEN REQUESTED A WORKING FIRE ASSIGNMENT THROUGH METRO-NET. GE2 MADE ENTRY TO THE SECOND FLOOR AND NOTICED THE EXTERIOR STAIRS WERE EXTREMELY BURNED, GE2 STARTED TO INITIATE A PRIMARY SEARCH WHILE LOCATING THE SEAT OF THE FIRE. GE2 WAS NAMED FIRE ATTACK AND WAS GIVEN THE BALANCE OF GE5 CREW TO HELP OUT IN FIRE ATTACK. GT1 WAS VENT GROUP AND PERFORMED VERTICAL VENTILATION. CE46 ALSO BACKED UP FIRE ATTACK, FIRE ATTACKED STATED THAT THE FIRE WAS KNOCKED DOWN AND THE PRIMARY SEARCH WAS COMPLETE. FIRE ATTACK ALSO CHECKED FOR EXTENSION AND FOUND FIRE IN THE STAIRWELL. CREWS THEN STARTED TO BREAK AWAY THE STUCCO AND NOTICED THE STAIRWELL WAS BADLY DAMAGED BY FIRE. THERE WERE LATER REPORTS THAT THERE WAS 1 VICTUM IN THE APARTMENT WHO JUMPED FROM A SECOND STORY WINDOW ONTO A MATTRESS TO ESCAPE THE FIRE. THE PATIENT WAS THEN CHECKED OUT BY GE5 PARAMEDICS BUT THE PATIENT DECIDED TO REFUSE TREATMENT AND SIGNED AMA. GE2, GT1 PERFORMED SALVAGE AND HELPED OUT THE TENANTS WITH GATHERING THEIR BELONGINGS. RED CROSS WAS ALSO REQUESTED BY THE IC FOR MULTIPLE PEOPLE THAT NEEDED ASSISTANCE. GE2 AND GT1 THEN PERFORMED OVERHAUL THAT INCLUDED THE USE OF FOAM. GE2 MADE CONTACT WITH THE PROPERTY OWNER ON SCENE AND FILLED OUT A RELEASE & ASSUMPTION OF RISK OF REAL PROPERTY FORM. GE2 CAPTAIN EXPLAINED THE FORM AND HAD THE OWNER SIGN AND DATE IT. GEZ THEN RELEASED THE PROPERTY BACK TO THE PROPERTY OWNER. GE2 WAS THEN COMPLETE.

CAPTAIN PARDOEN