INCIDENT	
Fire Department: Incident Number: Exposure Number: Multi-Agency IC#: Incident Date: Dispatch Time: Arrival Time: Controlled Time: Ending Time: First-In Company: District Incident Type: Mutual Aid: Method of Alarm: Type of Weather: Air Temperature Address, CSZ: Census Tract: Fire Haz Sev Zone:	Garden Grove Fire Department G1511171 00 A1529773 15-098428 00285199 09/28/15 21:36:32 21:42:03 21:49:17 00:54:37 GT1 G2421 Building fire None E911 73 12939 MAIN ST Medium
RESOURCES & CASUALTIES	
Actions Taken 1: Actions Taken 2: Actions Taken 3: #Apparatus Resp Engine: #Apparatus Resp Trk: #Apparatus Resp Med: #Apparatus Resp Oth: Fire Svs Injury: Fire Svs Fatal: Non-FS Injury: Non-FS Fatal:	Fire control or extinguishment, other 0 0 1 1 0 1 0 0 0 1
PROPERTY & STUDIES	
Property Losses: Content Losses: Property Value: Contents Value: Insurance Co: Building Ins: Mixed Prop Use: Property Use:	\$80,000 \$40,000
_	Restaurant or cafeteria

INCIDENT REPORT

Hazmat Rel: None

Critical Inc: Special Studies:

FIRE/ EXPLOSION SITUATION

Residential Units: Bldgs. Involved: Acres Burned: On-Site Mat/Stor:

Area of Origin

Cooking area, kitchen Undetermined Undetermined Heat Source: First Item:

Confined to Object:

Material Type:
Factor Causing:
Unintentional

Contributing Factors 1: Factors contributing to ignition, other

Contributing Factors 2:

Human Factor Cont 1: None

Human Factor Cont 2: Human Factor Cont 3:

Age Sex

Equip Involved: Kitchen & cooking equipment, other

Equip Brand: Equip Model:

Equip Serial Number:

Equip Year:

Equip Power Source: Natural gas or other lighter-than-air ga 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: 1

Main Floor Size: Fire Origin: 1000 Extent of Flame: Cooking area, kitchen Number of Stories DamageConfined to building of origin Minor: Sign: Heavy; Extreme: Auto Ext Sys: Present AES Type: AES Operation: # Sprinkler Heads: AES Failure Reason: Detectors: Unknown Detector Type: Det. Power Supply: Det. Operation: Det. Effectiveness: Det. Failure Reason:

ARSON

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Agency Name:
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:
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Int Observations 2:
Int Observations 3:
Lab Used 1:
Lab Used 2:
Lab used 3:
                           PATIENT REPORT
                        Unknown (OC-MEDS Import)
Name
DOB, Age, Sex
                                    40 Male
Address, CSZ:
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:
Other Factors:
Human Factors 1:
Human Factors 2:
Human Factors 3:
Cause of Injury:
Body Site of Injury 1:
Body Site of Injury 2:
Body Site of Injry:
Safety Equipment:
Cardiac Arrest:
CA Prearrival:
CA Init Rhythm:
Initial Care Level:
Highest Care Level:
Patient Status:
Pulse on Transfer:
Disposition:
                       Non-FD transport
```

COMMENTS

**** GT1 ****

STRUCTURE FIRE RESTAURANT/KITCHEN FIRE

GE7 WAS DISPATCHED TO A REPORTED FLAMES SEEN FROM THE ADDRESS ABOVE. GB1 WAS ON SCENE FIRST AND ASSINGED GE7 TO THE FRONT OF THE BUILDING, ALPHA SIDE, TO MAKE ENTRY AND ATTEMPT TO LOCATE THE FIRE. AFTER GE7 CREW PERFORMED FORCIBLE ENTRY INTO THE RESTAURANT, GE7 ADVANCED A HOSE LINE INTO THE KITCHEN AREA WHERE FLAMES WERE VISIBLE ON THE STOVE GRILL AREA . THE FIRE WAS EXTINGUISHED AND ADDITIONAL RESOURCES WERE UTILIZED IN THE EVENT. GE7 WAS ASSIGNED "INTERIOR" GE1 AND GE6 WERE ASSIGNED TO WORK FOR INTERIOR. AFTER INITIAL FIRE KNOCKDOWN, THERE WAS SMOKE PRODUCTION FROM WHAT APPEARED TO BE A VOID/ATTIC SPACE. VENTILATION CREWS COORDINATED WITH INTERIOR FIRE ATTACK AND THE FIRE WAS LOCATED IN A VOID SPACE IN BETWEEN TWO ATTIC SPACES. RESOURCES WERE UTILIZED TO SALVAGE AND OVERHAUL. GROVE INVESTIGATORS WERE CALLED OUT TO PERFORM AN INVESTIGATION OF THE FIRE. IT APPEARS THAT THE FIRE WAS CONFINED TO THE KITCHEN AREA AND THE ATTIC/VOID SPACE ABOVE THE STOVES. AFTER OVERHAUL, THE PROPERTY WAS RELEASED TO BUSINESS OWNER AND ALL APPROPRIATE PAPERWORK WERE COMPLETED.

FIRE/ENGINEER CLEARWATER WAS HURT IN THE FIRE VENTILATION PHASE OF THE EVENT. A KNEE PROBLEM WAS REPORTED TO APPROPRIATE PERSONNEL.

ACOSTA, A CAPT.

FIRE SERVICE CASUALTY _______

Casualty No: ID Number:

Name:

Sex:

Status:

DOB

Responses

Assignment: Date & Time:

23:00:00

Male

Physical Condition:

Severity: Taken to:

Moderate severity, 1

Activity:

INCIDENT REPORT

Symptom:
Area of Body:
Cause:
Contributing Factors:
Object Involved:
Where Injured:
Story Injured:
Specific:
Vehicle Type:
Equipment Failed:

CASUALTY COMMENTS

FIREFIGHTER/ENGINEER WAS HURT DURING VENTILATION OPPERATIONS WITH POSSIBLY A KNEE INURY. FF WAS RELIEVED AND SENT TO DR/HOME FOR EVAL