INCIDENT ______ Fire Department: Garden Grove Fire Department Incident Number: G1710971 Exposure Number: 00

Multi-Agency IC#: A1728575 01711360

Incident Date: 09/26/17

Dispatch Time: 05:35:48

Arrival Time: 05:43:17 Controlled Time: Ending Time: 16:38:33 First-In Company: GE26 District G2326
Incident Type: Fire, other Mutual Aid: None Method of Alarm: E911 Type of Weather: Air Temperature Address, CSZ: Census Tract: 12112 ADRIAN ST #6209 Fire Haz Sev Zone: Medium RESOURCES & CASUALTIES Actions Taken 1: Extinguishment by fire service personnel Actions Taken 2: Investigate Actions Taken 3: #Apparatus Resp Engine: 4 #Apparatus Resp Trk: 1
#Apparatus Resp Med: 0
#Apparatus Resp Oth: 6 Fire Svs Injury: 0
Fire Svs Fatal: 0 Fire Svs Fatal: Non-FS Injury: 0 Non-FS Fatal: PROPERTY & STUDIES \$300,000 Property Losses: Content Losses: \$25,000 Property Value: Contents Value: Insurance Co: Building Ins:

Multifamily dwelling

Detector alerted occupants

Mixed Prop Use: Property Use:

Detector

Hazmat Rel: None Critical Inc: Special Studies: FIRE/ EXPLOSION SITUATION Residential Units: Bldgs. Involved: Acres Burned: On-Site Mat/Stor: Area of Origin Laundry area, wash house (laundry) Undetermined Heat Source: First Item: Undetermined Confined to Object: Material Type: Intentional Factor Causing: Contributing Factors 1: Undetermined Contributing Factors 2: Human Factor Cont 1: None Human Factor Cont 2: Human Factor Cont 3: Age Sex Equip Involved: Clothes dryer 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: ARSON

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: Int Observations 2: Int Observations 3: Lab Used 1: Lab Used 2: Lab used 3:

COMMENTS

**** GE26 ****

Fire/Structure

GE26 arrived on scene to find smoke showing from a three story apartment. GE26 investigated, and found fire in a common laundry room. GE26 pulled a preconnected hoseline, and initiated fire attack and confirmed there were no residents inside. A working structure fire was requested by GE26. GE26 and supporting crews evacuated the first floor of the building involved, and checked the floors above the fire floor to evacuate and confirm there was no fire extension. Crews used a mechanical fan to evacuate smoke from the first and second floors.

While attacking the initial fire, other fire crews on scene found two additional and separate fires in the apartment complex. Fire fighters confined and extinguished the additional fires. A GGFD fire investigator was requested.

 $\mbox{\rm GE26}$ gave Grove investigator a report of findings upon arrival. $\mbox{\rm GE26}$ remained on scene to overhaul.

Capt. Nguyen

INCIDENT

Fire Department: Garden Grove Fire Department Incident Number: G1710972

00 Exposure Number:

Exposure Number:

Multi-Agency IC#:

Incident Date:

Dispatch Time:

001711359
09/26/17
05:43:25 Arrival Time: 05:45:22

Controlled Time:

Ending Time: 05:45:22 First-In Company: GFD

District G2326

Incident Type:
Mutual Aid: Service Call, other

None

Method of Alarm: Telephone

Type of Weather:

Air Temperature

Address, CSZ: CRYSTAL VIEW, 12091 BAYPORT ST

Census Tract:

Fire Haz Sev Zone: Medium

RESOURCES & CASUALTIES

Actions Taken 1: Action taken, other

Actions Taken 2: Actions Taken 3:

#Apparatus Resp Engine: 0 #Apparatus Resp Trk: 0 #Apparatus Resp Med: 0 #Apparatus Resp Oth: 0 Fire Svs Injury: Fire Svs Fatal:

Non-FS Injury: Non-FS Fatal:

PROPERTY & STUDIES

Property Losses: Content Losses: Property Value: Contents Value: Insurance Co: Building Ins: Mixed Prop Use:

Property Use: Multifamily dwelling

Detector

Hazmat Rel: Critical Inc: Special Studies:	None
	FIRE/ EXPLOSION SITUATION
Residential Units: Bldgs. Involved: Acres Burned: On-Site Mat/Stor: Area of Origin Heat Source: First Item: Confined to Object: Material Type: Factor Causing: Contributing Factors 1: Contributing Factors 2: Human Factor Cont 1: Human Factor Cont 3: Age Sex Equip Involved: Equip Brand: Equip Model: Equip Serial Number: Equip Year: Equip Power Source: Equip Portability: Mobile Prop Inv: Mobile Prop Make: Mobile Prop Make: Mobile Prop Model: Mobile Prop Lic. Plate: Mobile Prop VIN Number: Mobile Prop VIN Number: Mobile Prop Stolen?: Suppression Factors:	
	ARSON
Agency Name:	

Address: City: State:

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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:
                                    COMMENTS
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**** GFD ****

REFER TO ORANGE FD INCIDENT #01711359

CAPTAIN BRENEMAN

INCIDENT ______

Fire Department: Garden Grove Fire Department Incident Number: G1710989

00 Exposure Number:

Multi-Agency IC#:

Incident Date: 09/26/17 12:53:42 Dispatch Time: Arrival Time: 12:59:43

Controlled Time:

Ending Time: 13:07:32 First-In Company: GE26 District G2326

Incident Type: Mutual Aid: Unintentional transmission of alarm, other

None

Method of Alarm: Telephone

Type of Weather:

Air Temperature

Address, CSZ: Census Tract: CRYSTAL VIEW, 12091 BAYPORT ST

Fire Haz Sev Zone: Medium

RESOURCES & CASUALTIES

Actions Taken 1: Action taken, other

Actions Taken 2:

Actions Taken 3:

#Apparatus Resp Engine: 1 #Apparatus Resp Trk: 0 #Apparatus Resp Med: 0 #Apparatus Resp Oth: 0 0 Fire Svs Injury: Fire Svs Fatal:

Non-FS Injury: Non-FS Fatal:

PROPERTY & STUDIES

Property Losses: Content Losses: Property Value: Contents Value: Insurance Co:

Building Ins: Mixed Prop Use:

Property Use: Multifamily dwelling

Detector

Hazmat Rel: None Critical Inc: Special Studies: FIRE/ EXPLOSION SITUATION Residential Units: Bldgs. Involved: Acres Burned: On-Site Mat/Stor: Area of Origin Heat Source: First Item: Confined to Object: Material Type: Factor Causing: Contributing Factors 1: Contributing Factors 2: Human Factor Cont 1: Human Factor Cont 2: Human Factor Cont 3: Age Sex Equip Involved: Equip Brand: Equip Model: Equip Serial Number: Equip Year: Equip Power Source: Equip Portability: 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: ARSON

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:
Int Observations 2:
Int Observations 3:
Lab Used 1:
Lab Used 2:
Lab used 3:
                                    COMMENTS
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**** GE26 ****

AFA

GE-26 RESPONDED TO A FIRE ALARM AT THE ABOVE DISPATCHED ADDRESS. UPON ARRIVAL IT WAS DETERMINED THAT ACTIVATION OF THE ALARM WAS ACCIDENTAL.

ENGINEER NORMAN LOVELY