

A		KC143	IL	07	21	2009	1	09-0000072	000	<input type="checkbox"/> Delete	NFIRS -1				
FDID *		State *	Incident Date *	Station	Incident Number *	Exposure *			<input type="checkbox"/> Change	Basic					
<input type="checkbox"/> Check this box to Indicate that the address for this incident is provided on the Wildland Fire Module In Section B "Alternative Location Specification". Use only for Wildland fires.															
B Location*		<input type="checkbox"/> Street address 13917 E Rt 71 <input type="checkbox"/> Intersection <input type="checkbox"/> In front of <input type="checkbox"/> Rear of <input type="checkbox"/> Adjacent to <input type="checkbox"/> Directions													
		Number/Milepost	Prefix	Street or Highway				Street Type	Suffix						
		Yorkville				IL	60560								
		Apt./Suite/Room	City		State	Zip Code									
Cross street or directions, as applicable															
C Incident Type *		Midnight is 0000													
631 Authorized controlled burning		E1 Date & Times													
Incident Type		Check boxes if dates are the same as Alarm Date.		Month	Day	Year	Hr	Min	Sec	E2 Shift & Alarms					
				07	21	2009	21	05	00	Local Option					
D Aid Given or Received*		ARRIVAL required, unless canceled or did not arrive													
1 <input type="checkbox"/> Mutual aid received		Their FDID		Their State		X Arrival * 07 21 2009 21:13:00									
2 <input type="checkbox"/> Automatic aid recv.						CONTROLED Optional, Except for wildland fires									
3 <input type="checkbox"/> Mutual aid given						□ Controlled									
4 <input type="checkbox"/> Automatic aid given						LAST UNIT CLEARED, required except for wildland fires									
5 <input type="checkbox"/> Other aid given						X Cleared 07 21 2009 21:41:00									
N <input checked="" type="checkbox"/> None		Their Incident Number													
F Actions Taken *		G1 Resources *										G2 Estimated Dollar Losses & Values			
86 Investigate		Check this box and skip this section if an Apparatus or Personnel form is used.										LOSSES: Required for all fires if known. Optional for non fires.			
Primary Action Taken (1)		Apparatus		Personnel		Property \$,000		,000					
		Suppression 0004		0019		Contents \$,000		,000					
Additional Action Taken (2)		EMS				PRE-INCIDENT VALUE: Optional									
Additional Action Taken (3)		Other				Property \$,000		,000					
						Contents \$,000		,000					
		Check box if resource counts include aid received resources.													
Completed Modules		H1 * Casualties		None		H3 Hazardous Materials Release		I Mixed Use Property							
<input type="checkbox"/> Fire-2 <input type="checkbox"/> Structure-3 <input type="checkbox"/> Civil Fire Cas.-4 <input type="checkbox"/> Fire Serv. Cas.-5 <input type="checkbox"/> EMS-6 <input type="checkbox"/> HazMat-7 <input type="checkbox"/> Wildland Fire-8 <input checked="" type="checkbox"/> Apparatus-9 <input checked="" type="checkbox"/> Personnel-10 <input type="checkbox"/> Arson-11		Deaths		Injuries		<input type="checkbox"/> None 1 <input type="checkbox"/> Natural Gas: slow leak, no evaulation or HazMat actions 2 <input type="checkbox"/> Propane gas: <21 lb. tank (as in home BBQ grill) 3 <input type="checkbox"/> Gasoline: vehicle fuel tank or portable container 4 <input type="checkbox"/> Kerosene: fuel burning equipment or portable storage 5 <input type="checkbox"/> Diesel fuel/fuel oil: vehicle fuel tank or portable 6 <input type="checkbox"/> Household solvents: home/office spill, cleanup only 7 <input type="checkbox"/> Motor oil: from engine or portable container 8 <input type="checkbox"/> Paint: from paint cans totaling < 55 gallons 0 <input type="checkbox"/> Other: special HazMat actions required or spill > 55gal.. Please complete the HazMat form		<input type="checkbox"/> NN Not Mixed 10 <input type="checkbox"/> Assembly use 20 <input type="checkbox"/> Education use 33 <input type="checkbox"/> Medical use 40 <input type="checkbox"/> Residential use 51 <input type="checkbox"/> Row of stores 53 <input type="checkbox"/> Enclosed mall 58 <input type="checkbox"/> Bus. & Residential 59 <input type="checkbox"/> Office use 60 <input type="checkbox"/> Industrial use 63 <input type="checkbox"/> Military use 65 <input type="checkbox"/> Farm use 00 <input type="checkbox"/> Other mixed use							
J Property Use* Structures		341 <input type="checkbox"/> Clinic, clinic type infirmary		539 <input type="checkbox"/> Household goods, sales, repairs											
131 <input type="checkbox"/> Church, place of worship		342 <input type="checkbox"/> Doctor/dentist office		579 <input type="checkbox"/> Motor vehicle/boat sales/repair											
161 <input type="checkbox"/> Restaurant or cafeteria		361 <input type="checkbox"/> Prison or jail, not juvenile		571 <input type="checkbox"/> Gas or service station											
162 <input type="checkbox"/> Bar/Tavern or nightclub		419 <input type="checkbox"/> 1-or 2-family dwelling		599 <input type="checkbox"/> Business office											
213 <input type="checkbox"/> Elementary school or kindergarten		429 <input type="checkbox"/> Multi-family dwelling		615 <input type="checkbox"/> Electric generating plant											
215 <input type="checkbox"/> High school or junior high		439 <input type="checkbox"/> Rooming/boarding house		629 <input type="checkbox"/> Laboratory/science lab											
241 <input type="checkbox"/> College, adult education		449 <input type="checkbox"/> Commercial hotel or motel		700 <input type="checkbox"/> Manufacturing plant											
311 <input type="checkbox"/> Care facility for the aged		459 <input type="checkbox"/> Residential, board and care		819 <input type="checkbox"/> Livestock/poultry storage(barn)											
331 <input type="checkbox"/> Hospital		464 <input type="checkbox"/> Dormitory/barracks		882 <input type="checkbox"/> Non-residential parking garage											
Outside		519 <input type="checkbox"/> Food and beverage sales		891 <input type="checkbox"/> Warehouse											
124 <input type="checkbox"/> Playground or park		936 <input type="checkbox"/> Vacant lot		981 <input type="checkbox"/> Construction site											
655 <input type="checkbox"/> Crops or orchard		938 <input type="checkbox"/> Graded/care for plot of land		984 <input type="checkbox"/> Industrial plant yard											
669 <input type="checkbox"/> Forest (timberland)		946 <input type="checkbox"/> Lake, river, stream													
807 <input type="checkbox"/> Outdoor storage area		951 <input type="checkbox"/> Railroad right of way													
919 <input type="checkbox"/> Dump or sanitary landfill		960 <input type="checkbox"/> Other street													
931 <input checked="" type="checkbox"/> Open land or field		961 <input type="checkbox"/> Highway/divided highway													
		962 <input type="checkbox"/> Residential street/driveway													
Lookup and enter a Property Use code only if you have NOT checked a Property Use box: Property Use 931															
Open land or field															
NFIRS-1 Revision 03/11/99															

K1 Person/Entity Involved

Local Option

Business name (if applicable)

Area Code - Phone Number

Check This Box if same address as incident location. Then skip the three duplicate address lines.

Mr.,Ms., Mrs.	First Name	MI	Last Name	Suffix
Number	Prefix	Street or Highway	Street Type	Suffix
Post Office Box		Apt./Suite/Room	City	
State	Zip Code			

More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary

K2 Owner

Same as person involved?
Then check this box and skip
The rest of this section.

Local Option

Business name (if Applicable)

Area Code - Phone Number

Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr.,Ms., Mrs.	First Name	MI	Last Name	Suffix
Number	Prefix	Street or Highway	Street Type	Suffix
Post Office Box		Apt./Suite/Room	City	
State	Zip Code			

L Remarks

Local Option

On 7/21/09 at 21:05 hrs NFD was dispatched to 13917 Rt 71 for a field fire (wheat field). Earlier in the day of 7/21/09 we received a called from the land owner at 16:00 hrs that he was going to have a controlled burn at this location, burning a combined wheat field. We responded to this location to verify that it was still a controlled burn. Upon our arrival we found that the field was disked up around the burned area. Command stated that there was going to be no problem leaving it burn off. All NFD units cleared the scene and returned to quarters at 21:41 hrs.

L Authorization

001	Mathre, Lowell	FC	07	21	2009	
Officer in charge ID	Signature	Position or rank	Assignment	Month	Day	Year

Check Box if 004
same as Officer Member making report ID
in charge.

004	Kellogg, Dave	SO	07	25	2009
Signature	Position or rank	Assignment	Month	Day	Year