

Northwest Arctic Borough Fire Incident Form



Village: _____

REPORT DATE: _____ REPORT#: _____ REPORT BY: _____

INCIDENT DATE: _____ CALLOUT TIME: _____ ARRIVAL TIME: _____

LAST UNIT CLEARED TIME: _____

ACTUAL FIRE: YES / NO FALSE ALARM: YES / NO DUMP FIRE: YES / NO

LOCATION OF INCIDENT: HOUSE#: _____ STREET: _____

OWNER OR OCCUPANT NAME: _____

LEGAL DESCRIPTION OF PROPERTY: LOT#: _____ BLOCK#: _____ SURVEY#: _____

NUMBER OF STORIES ON HOUSE/STRUCTURE: _____ SMOKE ALARMS: YES / NO / UNSURE

VEHICLE FIRE- MAKE: _____ MODEL: _____ YEAR: _____

NUMBER AND NATURE OF INJURIES: _____

ADULTS: _____ CHILDREN: _____ OTHER: _____

NUMBER AND NATURE OF FATALITIES: _____

ADULTS: _____ CHILDREN: _____ OTHER: _____

DESCRIPTION OF PROPERTY DAMAGE: _____

ESTIMATED DOLLAR VALUE OF DAMAGE: _____

PROBABLE CAUSE OF FIRE (IF KNOWN): _____

RESPONDING FIRE FIGHTERS: _____

FIRE RESPONSE ASSETS USED (LIST): _____

PAGE TWO, NWABFD INCIDENT REPORT FORM, VILLAGE: _____ REPORT#: _____

DESCRIPTION OF RESPONSE OPERATION (DETAIL): _____

PROBLEMS ENCOUNTERED: _____

ADDITIONAL INFORMATION: _____

FORM COMPLETED BY: _____

TITLE: _____

DATE: _____

THIS FORM MUST BE COMPLETED FOR EVERY FIRE, AND TURNED IN ON A TIMELY MANNER TO NAB FIRE SAFETY COORDINATOR IN KOTZEBUE VIA FAX, OR SCAN AND EMAIL.

NORTHWEST ARCTIC BOROUGH FIRE DEPARTMENT **FAX NUMBER:** 907-442-2930 **EMAIL:** hnelson@nwabor.org