File 1713

NO. PROVIDENCE FIRE DEPARTMENT
– SECONDARY RESCUE REPORTS –

DATE: 8/2/73 TIME: ARRIVED 9:24 p.m. RETURNED 9:30 p.m.

NAME: AGE:

ADDRESS: ALARM BY: POLICE (FIRE PHONE)

LOCATION OF RESCUE NORTH PROVIDENCE POLICE STATION

EXAMINATION

SKULL * LACARATION TOP OF HEAD

EYES *

EARS *

NOSE *

MOUTH *

CHEST *

ABDOMEN *

UPPER EXTREMITIES *

LOWER EXTREMITIES *

POSITION OF PATIENT WHEN FOUND: SITTING DOWN

WAS PATIENT CONSCIOUS? YES

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN) YES

PATIENT TRANSPORTED TO: ROGER WILLIAMS HOSP. BY RESCUE #1.

IF PATIENT WAS NOT TRANSPORTED EXPLAIN:

* NORMAL – No visible signs of lacerations, abrasions, discoloration, swelling, bleeding or fractures. No complaints of pain.

REMARKS -- (List First Aid Given, If Any)

TRINANGLE BANADGE

COMPRES

(CHECK WITH RESCUCE #1 FOR DETAILS)

SIGNED: B. Di Giulio OFFICER IN CHARGE: Chief Di Giulio

RESCUE CO. NO. Eng # 1

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 424 N. P. File # 1714

Date: 8/2/73
MONTH DAY YEAR

Time alarm received 9:59 P M Number of miles traveled 3

Time back in service _____ M

Time back at station 10:04 P M

Alarm received by: Box # 522 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) HUMBERT & RAYMOND

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		_____
_____		_____

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 2, 6 Ladder(s) #1 Rescue(s) #2 Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

Ladder I.

~~ENGINE~~(S) #	LADDER(S) #	RESCUE #
E. PELLAND		
C. ZAHN		
G. KENNAWA Y		
T. PERNA		
R. PARENTEAU		
R. RATHIER		
P RUGGIANO		
D. HOUDE		

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT. J. MURPHY	
	LT. R. PAQUET	
	F. RUSSO	
	R. URQUHART	
	F. ROTELLA	

REMARKS: CODE BLUE.

Bernard M. Gallio
SIGNED BY:

E. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 425 N. P. File # 1716

Date: 8/3/73 (MONTH / DAY / YEAR)

Time alarm received 3:25 P M Number of miles traveled 3

Time back in service 3:33 P M

Time back at station 3:35 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) 1974 MINERAL SPRING AVE.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☒ XX Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ XX Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
1	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
	WRENCHES				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 Ladder(s) _____ Rescue(s) _____ Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
~~J. MOLLO~~ D. FORTIN		
B. DI GIULIO		
D. BAZZLE		
R. RATHIER		
P. PHILLIPS		

VEHICLE	STATION	ON SCENE
	LT. E. DI GIULIO	
	~~P. RUGGIANO~~	
	S. COPPA	
	~~W. DRAPER~~	

REMARKS: ~~CARBURETOR OVERFLOW, FIRE IN MOTOR.~~

OWNER: UNCLE JOES FROZEN LEMONADE.
DRIVER: JOSEPH DI FUSCO
594 CHARLES ST.
PROV. R. I.
1966 INTERNATIONAL VAN TRUCK
REG: R.I.82214

Bernard DiGiulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 426 N. P. File # 1721

Date: 8/4/73
MONTH DAY YEAR

Time alarm received 10:34 P M Number of miles traveled 2

Time back in service 10:41 P M

Time back at station 10:48 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) 10 HOWARD AVE.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

	EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose		SALVAGE COVERS
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #1, 2. Ladder(s) #1. Rescue(s) #2. Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
C. ZAHN	J. MOLLO	
G. KENNAWAY	E. PELLAND	
T. RUSSO	J. BOREK	
P. RUGGIANO	D. BAZZLE	
	R. RATHIER	
	F. ROTELLA	

VEHICLE	STATION	ON SCENE

REMARKS: CALL FOR TREE FIRE NEXT TO DWELLING AT 10 HOWA RD AVE.
NO SUCH ADDRESS.

Bernard DiGiulio

SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 427 N. P. File # 1727

Date: 8/5/73
MONTH DAY YEAR

Time alarm received 5:14 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 5:20 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) WOONASQUATUCKET AVE.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ALLENDALE MILL

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		XX Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		DROWNING

	EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose		SALVAGE COVERS
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) ____ Ladder(s) #1 Rescue(s) #1, 1a, BOAT Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
T. RUSSO	J. BOREK	
P. RUGGIANO	J. LANE	
	D. BAZZLE	
	R. RATHIER	
	D. HOUDE	

VEHICLE	STATION	ON SCENE
	CAPT. J. MURPHY	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE: REPORT OF DROWNING BEHIND ALLENDALE MILL.

SIGNED BY: Bernard W. Gillis

F. BURSIE

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # ~~428~~ 428 N. P. File # 1737

Date: 8/7/73
MONTH DAY YEAR

Time alarm received 11:10 P M Number of miles traveled 4

Time back in service ____ M

Time back at station 11:21 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) 8 CROSS ST.

Cause of fire SET

Description of building or occupancy: WOODEN SHED

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	XX ☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
XX ☐ Miscellaneous fires (describe) WOODEN SHED		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	50'	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				1	PIKE POLE
				1	HANDLIGHT

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: 10

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #1 Ladder(s) ____ Rescue(s) ____ Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY		
LT. R. PAQUET		
G. KENNAWAY		
D. FORTIN		
T. PERNA		
F. BURSIE		
J. LANE		
S. COPPA		
D. HOUDE		
VEHICLE	**STATION**	**ON SCENE**
R. RATHIER	W. ROY	
	C. ZAHN	
	D. BAZZLE	
	F. ROTELLA	

REMARKS: CODE YELLOW, SMALL CORNER OF SHED INVOLED.

Bernard A. Murphy
SIGNED BY:

CAPT. J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 429 N. P. File # 1747

Date: 8/9/73
MONTH DAY YEAR

Time alarm received 7:37 A M Number of miles traveled 5

Time back in service 7:50 A M

Time back at station 7:55 A M

Alarm received by: Box # 123 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) WATERMAN & GREYSTON AVE.

Cause of fire GENERATOR

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☒ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☒ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	25'	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				2	PAIR ASBESTORS
					GLOVES
				1	PIKE POLE

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 10

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #1, 2, 6. Ladder(s) #1. Rescue(s) #2. Car: #1.

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. E. DI GIULIO	J. MOLLO	
B. DI GIULIO	T. RUSSO	
	T. VERONE (F.H.)	
	W. DRAPER	
VEHICLE	**STATION**	**ON SCENE**
R. RATHIER	CAPT. J. MURPHY	
S. LABUTTI (LYM.)	F. ROTELLA	

REMARKS: CODE YELLOW, MOTOR FULLY INVOLVED, CAUSED BY GENERATOR.

OWNER: GUIDO GOSETTI
16 MATHEWSON ST.
JOHSTON, R.I.

DRIVER: JERRY GOSETTI — 64 VKS. 2DR. BLUE
SAME ADDRESS. — REG. R.I. BV975

Bernard Di Giulio
SIGNED BY:

lt. e. di giulio
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTRIDA LE Company Alarm # 430 N. P. File # 1749

Date: 8 (MONTH) 9 (DAY) 73 (YEAR)

Time alarm received 1:10 P M Number of miles traveled 2

Time back in service 1:15 P M

Time back at station 1:22 P M

Alarm received by: Box # 1124 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) SUN SET AVE

Cause of fire _____

Description of building or occupancy: SENIOR CITIZEN S HOUSIN G

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☒ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1, 2, 3 Ladder(s) 1 & 2 Rescue(s) 1, 2 Car: 1

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E DI GIULIO	CAPT J MURPHY	
B. DI GIULIO	T. RUSSO	
V. DI IORO(LYM)	S. COPPA	
	W. DRAPER	
	J MOLLO	
VEHICLE	**STATION**	**ON SCENE**
P. RUGGIAN O		

REMARKS: ACCIDEN TAL NO FIRE

Lt. E. Di Giulio
SIGNED BY:

LT E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 431 N. P. File # 1751

Date: 8/9/73
MONTH DAY YEAR

Time alarm received 7:32 P M Number of miles traveled 5

Time back in service ____ M

Time back at station 7:52 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) McGUIRE RD.

Cause of fire OPEN BURNING

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	XX Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
XX Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	100'	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				1	PIKE POLE

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: 5

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #1 Ladder(s) ____ Rescue(s) ____ Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
G. KELLEHAY		
T. PERNA		
R. PARENTEAU		
J. BOREK		
D. BAZZLE		
D. HOUDE		
P. RUGGIANO		

VEHICLE	STATION	ON SCENE
	CAPT. J. MURPHY	
	T. RUSSO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE YELLOW. CONTRACTORS FOR APT. HOUSE ARE DUMING AND BURNING DEBRIS DURNING DAY AND LEAVING IT SMOLDERING AT NIGHT. ALWAYS A COMPLAINT ON THIS.

Bernard Di Giulio

SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 32 N. P. File # 1752

Date: 8/9/73
MONTH DAY YEAR

Time alarm received 10:42 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 10:47 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) 68 [redacted] ALLEN AVE.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #1 #2 Ladder(s) #1 Rescue(s) #2 Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. J. MURPHY	R. MARWELL
W. ROY	LT. R. PAQUET	
G. KENNAWAY	J. MOLLO	
D. FORTIN	E. PELLAND	
T. RUSSO	C. ZAHN	
J. BOREK	R. PARENTEAU	
	F. BURSIE	
	R. IARRATE	
	R. RATHIER	
	P. RUGGIANO	
VEHICLE	**STATION**	**ON SCENE**
	F. ROTELLA	

REMARKS: CODE BLUE, NO ONE WOULD ANSWER DOOR. NO FIRE OR SMOKE VISIBLE.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 433 N. P. File # 1759

Date: 8/10/73
MONTH DAY YEAR

Time alarm received 9:45 P M Number of miles traveled 11

Time back in service 10:36 P M LA. 1

Time back at station 11:18 P M E. 1

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) CROSS ST.

Cause of fire SET

Description of building or occupancy: WOODEN SHED

Owner of building or occupancy: RAINBOW HOMES (VACANT)

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
XX Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	XX Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	200'	Booster 1"		Aerial
	Dry Chemical	600'	1½ Inch Hose		Over 35 Feet
	Foam	500'	2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)			50'	Other Equipment
2	PIKE POLES			2	BLANKETS
2	FLOODLIGHTS				RESCUSITATOR
2	HANDLIGHTS				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 30

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1, 2. Ladder(s) #1. Rescue(s) 2. [redacted] Car: _____

Other companies responding: SPEC. SIG. REC. #1

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
LT. E. DI GIULIO	J. MULLO	
C. ZAHN	F. BURSIE	
G. KENNAWAY	J. BOREK	
T. PENNA		

VEHICLE	STATION	ON SCENE
R. RATELLE	D. BAZZLE	
P. RUGGIANO		
F. ROTELLA		

REMARKS: CODE YELLOW FOR ENG.1, LAD.1.
WOODEN SHED LOADED WITH RUBBISH, COMPLETELY INVOLVED.
THIS WAS THE THIRD INCIDENT ON THIS SHED.
C. ZAHN TAKEN TO ROGER WILLIAMS HOSP. BY RESCUE #1.
(SMOKE INHALATION)

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 434 N. P. File # 1773

Date: 8/13/73
MONTH DAY YEAR

Time alarm received 12:38 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 12:44 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) 62 ONLEY AVE.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red MITHOT .D	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

	EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose		SALVAGE COVERS
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #2, 6. Ladder(s) #1. Rescue(s) #1, 1a, 2. Car: #78

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT. R. PAQUET	
	T. PERNA	
	R. PARENTEAU	
	K. MIDDLETON	
	J. BOREK	
	P. RUGGIANO	
	W. ROY	

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
F. ROTELLA	J. MOLLO	
	D. FORTIN	

REMARKS: CODE BLUE FROM ENG. 2.

Bernard Di Giulio

SIGNED BY:

87#

LT. R. PAQUET

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 435 N. P. File # 1774

Date: ~~8/13~~ 8/13.73
MONTH DAY YEAR

Time alarm received 12:48 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 12:50 P M

Alarm received by: Box # ____ Phone ____ Other PASSING BY. (Describe)

Location of alarm: (Street and Number) SMITH ST. FRONT OF CENTREDALE DODGE.

Cause of fire ____

Description of building or occupancy: CAR

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	XX ☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
XX ☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
1	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) ____ Ladder(s) #1. Rescue(s) ____ Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT. R. PAQUET	
	W. ROY	
	T. PERNA	
	R. PARENTE.U	
	K. MIDDLETON	
	J. BOREK	
	P. RUGGIANO	

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
F. ROTELLA	J. MOLLO	
	D. FORTIN	

REMARKS: RETURNING TO STATION FROM 62 ONLEY AVE. SPOTTED CAR FIRE. SMALL FIRE UNDER HOOD. NO ESTIMATED DAMADGE.

OWNER: SUSAN PRIOR
1254 DOUGLAS AVE.
NO. PROV. R.I. REG: R.I.TL950

Bernard W. Jules
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 436 N. P. File # 1785

Date: 8/15/73 (MONTH / DAY / YEAR)

Time alarm received 12:30 PM Number of miles traveled 0

Time back in service ____ M

Time back at station 1:40 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) 2026 SMITH ST.

Cause of fire ____

Description of building or occupancy: ADAMS DRUGS

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		XX ☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		WATER EMERGENCY

	EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose	1	Under 35 Feet 20'
	Pump Cans		3 Inch Hose		**SALVAGE COVERS**
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				1	CROW BAR

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) ____ Ladder(s) #1 Rescue(s) ____ Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
	J. MOLLO	
	D. FORTIN	
	B. DI GIULIO	
	D. BAZZLE	

VEHICLE	STATION	ON SCENE
W. DRAPER	LT. E. DI GIULIO	

REMARKS: ROOF DRAIN BLOCKED. CLEANED SAME.

Bernard Di Giulio
SIGNED BY:

J. MOLLO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 437 N. P. File # 1808

Date: 8 (MONTH) 19 (DAY) 73 (YEAR)

Time alarm received 3:55 A M Number of miles traveled 8

Time back in service ____ M

Time back at station 4:00 A M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) 18 CENTREDALE ST.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

	EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose		SALVAGE COVERS
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) 1, 2 Ladder(s) 1 Rescue(s) 2 Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CH IEF DI GIULIO	CA PT MURPHY	
W. ROY	CA PT SA LISBURY	
C. ZAH N	LT PAQUET	
K. MIDDLETOM	J. MOLLO	
T. RUSSO	D. FORTIN	
	P. RUGGIA N O	
	F. B URSIE	

VEHICLE	STATION	ON SCENE
	F. ROTELLA	

REMARKS: CODE B LUE

Lt. Emil Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 438 N. P. File # 1814

Date: 8 (MONTH) 20 (DAY) 73 (YEAR)

Time alarm received 3:55 A M

Time back in service 3:58 A M

Time back at station 4:00 A M

Number of miles traveled 2

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) SMITHFIELD RD. (SMITH FIELD MANOR)

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		_____
_____		_____

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 3, 4, 2 Ladder(s) 1 Rescue(s) 2 Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
	CA PT SALISBURY	
	LT PAQUET	
	W. ROY	
	E. PELLA ND	
	G. KENNAWAY	
	F. BURSIE	
	J. LAN E	
	D. BAZZLE	
	T. PERNA	
VEHICLE	**STATION**	**ON SCENE**
	CHIEF DI GIULIO	
	CAPT MURPHY	
	LT DI GIULIO	
	J. MOLLO	
	T. RUSSO	
	F. ROTELLA	

REMARKS: CCODE B LUE

D. Louis Di Giulio
SIGNED BY:

CAPT C. SALISB URY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDA LE Company Alarm # 439 N. P. File # 1823

Date: 8 (MONTH) 21 (DAY) 73 (YEAR)

Time alarm received 8:47 p M Number of miles traveled 3

Time back in service ____ M

Time back at station 8:57 p M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) WATERMAN & GREYSTONE A VE

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☒ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		ROAD ACCIDENT

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
2	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) 1 Ladder(s) ____ Rescue(s) 1 Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E DI GIULIO		
D. FORTIN		
K. MIDDLETON		
D. BAZZLE		
R. RA THIER		
T. RUSSO		

VEHICLE	STATION	ON SCENE
C. ZA HN	P. PALOMBO	
F. BURSIE	T. PERNA	
D. HOUDE	W. DRA PER	
R. URQH A RT		

REMARKS: 2 CAR ACCIDEN T. NO GAS IN ST, SWEPT UP BROKEN GLASS

1- ELENA FLYNN 11NELSON ST. NO. PROV, R. I.

B R 687 CHEV STA WAGON

(TRANSPORTED TO R. I. H OSP. BY RES. 1)

2 - 62 FORD PX 31 (DRIVER NOT AT SCENE)

E. Di Giulio

SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTRAL DALE Company Alarm # 140 N. P. File # 1825

Date: 8 (MONTH) 21 (DAY) 73 (YEAR)

Time alarm received 11:27 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 11:36 P M

Alarm received by: Box # 513 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) WOON. & WA TER

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 2 6 Ladder(s) 1 Rescue(s) 1, 2 Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
lt R. PAQUET	CAPT J. MURPHY	
W. ROY	D. FORTIN	
E. PELLAN D	F. BURSIE	
C. ZAHN	D. HOUDE	
J. B OREK	T. PERNA	
T. RUSSO		
VEHICLE	**STATION**	**ON SCENE**
R. RATHIER		

REMARKS: CODE BLUE

SIGNED BY:

CAPT J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CEN TREDALE Company Alarm # 441 N. P. File # 1830

Date: 8 (MONTH) 23 (DAY) 73 (YEAR)

Time alarm received 3:30 A M Number of miles traveled 2

Time back in service ____ M

Time back at station 3:57 A M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) 50 WATERMA N A VE (EVANS PLATING)

Cause of fire ELECTRICAL

Description of building or occupancy: ____

Owner of building or occupancy: HEN RY CA RL (FOREMAN)

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☒ XX Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☒ XX Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
2	HA ND LIGHTS				

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) 1 Ladder(s) 1 Rescue(s) ____ Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CH IEF E DI GIULIO	CAPT J. MURPHY	
W. ROY	LT R. PAQUET	
C. ZAHN	F. BURSIE	
K. MIDDLETON	D. BAZZLE	
T. RUSSO		

VEHICLE	STATION	ON SCENE

REMARKS: GUARDIAN _ GROSS ALARM BLDG. FULL OF SMOKE & CHEMICAL FUMES CAUSED BY OVERH EATED RECTIFIER & ELECTROPLATING TA NK. SHUT OFF RECTIFIER & NOTIFIED OWNER, THERE WAS NO FIRE

E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 442 N. P. File # 1832

Date: 8 (MONTH) 23 (DAY) 73 (YEAR)

Time alarm received 1:36 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 1:42 P M

Alarm received by: Box # 6122 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) GREYSTONE SCHOOL

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☒ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): RADIO CAN NOT RECEIVE FROM HQ. LADDER 1 CALLED SUPT. OF FIRE ALARM RADIO MAN HAS BEEN CALLED

Companies responding: ____

Engines(s) 1 Ladder(s) 1 Rescue(s) ____ Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
lt E. DI GIULIO	J. MOLLO	
P. PHILLIPS	E. PELLAND	
	G. KENNAWAY	
VEHICLE	**STATION**	**ON SCENE**
W. DRAPER		

REMARKS: JANITOR HIT HEAT DETECTOR BY MISTAKE & SET OFF ALARM

Lt. Ernie DeGiulio
SIGNED BY:

E. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 443 N. P. File # 1836

Date: 8 (MONTH) 23 (DAY) 73 (YEAR)

Time alarm received 8:31 P M Number of miles traveled 3

Time back in service 8:44 P M

Time back at station 8:47 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) POLLY DR.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

	EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose		SALVAGE COVERS
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): LADDER 1 RADIO NOT RECEIVING HQ.

Companies responding: _____

Engines(s) 1 Ladder(s) _____ Rescue(s) _____ Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
P. RUGGIAN O		
T. RUSSO		
VEHICLE	**STATION**	**ON SCENE**
	P. PALOMBO	
	W. DRAPER	

REMARKS: REPORT FOR BRUSH FIRE AT END OF ST. NO FIRE

E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 445 N. P. File # 1839

Date: 8 (MONTH) 23 (DAY) 24 73 (YEAR)

Time alarm received 1:02 A M Number of miles traveled 0

Time back in service ____ M

Time back at station 1:06 A M

Alarm received by: Box # 414 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) HIGH SERVICE & SMITH ST.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue XX	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): LADDER 1 RADIO NOT RECEIVING HQ .

Companies responding: ____

Engines(s) 1, 2, 3, 4 Ladder(s) 1 Rescue(s) 2 Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT J. MURPHY	
	CAPT C. SALISBURY	
	LT E. DI GIULIO	
	LT R. PAQUET	
	C. ZAHN	
	K. MIDDLETON	
	J. LANE	
	R. RATHIER	

REMARKS: CODE BLUE ENG. 2 CENT. DID NOT LEAVE STATION

E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 444 N. P. File # 1838

Date: 8 (MONTH) 23 (DAY) 73 (YEAR)

Time alarm received 10:33 PM Number of miles traveled 2

Time back in service 10:38 PM

Time back at station 10:44 PM

Alarm received by: Box # 432 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) SAMPSON & HAWKINS BLVD.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): LADDER 1 RADIO NOT RECEIVING HQ.

Companies responding: _____

Engines(s) 2, 1, 6 Ladder(s) 1 Rescue(s) 2 Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT J. MURPHY	
C. ZAHN	LT R. PAQUET	
J.BOREK	R. RATHIER	
J. LANE	D. HOUDE	
T. RUSSO	T. PERNA	

VEHICLE	STATION	ON SCENE

REMARKS: CODE BLUE FROM ENG. 2

H. Enrico Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 446 N. P. File # 1840

Date: 8 (MONTH) 24 (DAY) 73 (YEAR)

Time alarm received 8:50 P M Number of miles traveled 3

Time back in service ____ M

Time back at station 9:01 P M

Alarm received by: Box # 522 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) HUMBERT & RAYMOND

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): RADIO HAS BEEN FIXED ON LADDER

Companies responding: ____

Engines(s) 2, 6 Ladder(s) 1 Rescue(s) 1, 2 Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
	F. B URSIE	
	J. BOREK	
	E. PELLAND	
	C. ZAHN	
	T. R USSO	
VEHICLE	**STATION**	**ON SCENE**
	CHIEF E. DI GIULIO	
	CAPT C. SALISBURY	
	LT E. DI GIULIO	
	W. DRAPER	

REMARKS: CODE BLUE

SIGNED BY:

F. BURSIE
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 447 N. P. File # 1841

Date: 8 (MONTH) 24 (DAY) YEAR 73

Time alarm received 9:48 P M Number of miles traveled 4

Time back in service ____ M

Time back at station 9:50 P M

Alarm received by: Box # 531 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) ROSEDALE ST.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) 6, 2 Ladder(s) 1 Rescue(s) 1, 2 Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
	CHIEF E. DI GIULIO	
	E. PELLAND	
	F. BURSIE	
	T. RUSSO	

VEHICLE	STATION	ON SCENE
	CAPT J. MURPHY	
	D. FORTIN	
	J. BOREK	
	J. LAN E	
	R. RATHIER	
	T. PERNA	

REMARKS: CODE BLUE

SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 448 N. P. File # 1842

Date: 8 (MONTH) 24 (DAY) 73 (YEAR)

Time alarm received 9:50 P M Number of miles traveled 26

Time back in service 10:35 P M

Time back at station 11:42 P M

Alarm received by: Box # _____ Phone XX Other LADDER BY RADIO (Describe)

Location of alarm: (Street and Number) CROSS ST.

Cause of fire SET

Description of building or occupancy: SHACK

Owner of building or occupancy: RAINBOW HOMES

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☒ XX Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe) SHACK		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	400'	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)	100'	3/4"		Other Equipment
2	PIKE POLES			1	FLOOD LIGHT
2	HAND LIGHTS				

APPARATUS REPORT

Working time of pump: Hours: ENG. 1½ minutes: LADDER 10 min.

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 Ladder(s) 1 Rescue(s) _____ Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY	CHIEF E. DI GIULIO	
D. FORTIN	E. PELLAND	
J. BOREK	F. BURSIE	
R. RATHIER	T. PERNA	
T. RUSSO		
VEHICLE	**STATION**	**ON SCENE**
J. LANE		
W. ROY		

REMARKS: ALLOWED SHACK TO BURN DOWN . THIS WAS THE FOURTH TIME THIS SHACK HAS BURNED ENG1 DUMPED 3 TANKS OF WATER

Capt J. Murphy Jr.

SIGNED BY:

CAPT JOHN MURPHY JR.

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 149 N. P. File # 1848

Date: 8 (MONTH) 25 (DAY) 73 (YEAR)

Time alarm received 1:21 P M Number of miles traveled ~~XX~~ 5

Time back in service 1:40 P M

Time back at station 1:45 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) CROSS ST.

Cause of fire REKINDLE

Description of building or occupancy: SHACK

Owner of building or occupancy: RAINBOW HOMES

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☒ XX Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe) SHACK		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	50' 5~~0~~XX	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 10

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 Ladder(s) _____ Rescue(s) _____ Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E. DI GIULIO		
LT R PAQUET		
W. ROY		
S. COPPA		
T. PERNA		
G. KENNAWAY		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	D. HOUDE	
W. DRAPER		
T. RUSSO		

REMARKS: PILE OF WOOD SMOKING FROM NIGHT BEFORE

Lt Ernie Di Giulio
SIGNED BY:

LT ERNIE DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTRAL DALE Company Alarm # 450 N. P. File # 1853

Date: 8 (MONTH) 26 (DAY) 73 (YEAR)

Time alarm received 12:45 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 12:53 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) WOON AVE. (REAR OF ALLENDALE MILL)

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ XX Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		DROWNING

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) ____ Ladder(s) 1 Rescue(s) 1, 1A w/BOAT Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
	CHIEF E. DI GIULIO	
	W. ROY	
	C. ZAHN	
	D. FORTIN	
	S. COPPA	
	T. RUSSO	
	T. PERNA	

VEHICLE	STATION	ON SCENE
	LT R. PAQUET	
	D. HOUDE	

REMARKS: CALL FOR B OY IN RIVER

Lt. Ernest Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 451 N. P. File # 1854

Date: 8 (MONTH) 26 (DAY) 73 (YEAR)

Time alarm received 2:19 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 2:27 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) ST. JOHNS CIRCLE

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) 1 Ladder(s) ____ Rescue(s) ____ Car: ____

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
C. ZAHN		
D. FORTIM		
K. MIDDLETON		
T. PERNA		

VEHICLE	STATION	ON SCENE
	J. MOLLO	
	D. BAZZLE	
	D. HOUDE	
	T. RUSSO	

REMARKS: CODE BLUE

E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 452 N. P. File # 1858

Date: 8 (MONTH) 27 (DAY) 73 (YEAR)

Time alarm received 1:40 A M Number of miles traveled 8

Time back in service 2:10 A M

Time back at station 2:20 A M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) WATERMAN & GREYSTONE AVE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☒ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe) WASH DOWN
☐ Miscellaneous fires (describe)		CAR ACCIDENT

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	100'	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	HAND LIGHT				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 15

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 Ladder(s) _____ Rescue(s) _____ Car: 78

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E. DI GIULIO		
LT R. PAQUET		
W. ROY		
E. PELLAND		
F. BURSIE		
J. BOREK		
R. RATHIER		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT J. MURPHY	
	C. ZAHN	
	D. HOUDE	

REMARKS: CAR HIT ISLAND & SIGN, NO INJURIES GASOLINE IN ST.
JAMES J MICHELL
8 HARRIS AVE JOHNSTON R. I.
REG. R. I. QU 87 67 FORD 2dr. BLUE

Lt. Emile Di Giulio
SIGNED BY:

LT R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company_____ Company Alarm #_____ N. P. File # _____

Date: _____
MONTH DAY YEAR

Time alarm received _____ M

Time back in service _____ M

Time back at station _____ M

Number of miles traveled _____

Alarm received by: Box #_____ Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) _____

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		_____
_____		_____

	EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose		SALVAGE COVERS
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s)_____ Ladder(s)_____ Rescue(s)_____ Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT E. DI GIULIO	
	E. PELLAND	
	C.ZAHN	
	R. RATHIER	
	T. RUSSO	

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	F. BURSIE	
	J. BOREK	
	D. BAZZLE	
	P. RUGGIANO	
	D. HOUDE	
	T. PERNA	
	W. DRAPER	

REMARKS:

CODE BLUE

Lt E. Di Giulio
SIGNED BY:

LT E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTRAL DALE Company Alarm # 453 N. P. File # 1864

Date: 6 (MONTH) 27 (DAY) 73 (YEAR)

Time alarm received 9:07 P M

Time back in service 9:00 P M

Time back at station 9:15 P M

Number of miles traveled 3

Alarm received by: Box # 417 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) ONLEY & SHEFFIELD

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		_____
_____		_____

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 2, 6 Ladder(s) 1 Rescue(s) 2 Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #

VEHICLE	STATION	ON SCENE

REMARKS:

SIGNED BY:

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 454 N. P. File # 1866

Date: 8 (MONTH) 28 (DAY) 73 (YEAR)

Time alarm received 8:36 A M Number of miles traveled 2

Time back in service 9:01 A M

Time back at station 9:05 A M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) 11 LOCUST AVE.

Cause of fire BACKFIRE (B OILER)

Description of building or occupancy: _____

Owner of building or occupancy: MRS. JOS. BAILEY

Owner's address: SAME

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
XX Fire in dwelling	XX Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
2	SMOKE EJECTORS				
	& CORD				
1	HAND LIGHT				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 Ladder(s) 1 Rescue(s) _____ Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
P. PH ILLIPS	LT E. DI GIULIO	
J. MOLLO	D. B A ZZLE	
	D. FORTIN	

VEHICLE	STATION	ON SCENE
W. ROY		
P. RUGGIAN O		

REMARKS: BOILER BACKFIRED SMOKE IN CELLAR

SIGNED BY:

P. PH ILLIPS
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm #455 N. P. File # 1870

Date: 8 (MONTH) 29 (DAY) 73 (YEAR)

Time alarm received 2:05 P M Number of miles traveled 2

Time back in service 2:33 P M

Time back at station 2:35 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)

Location of alarm: (Street and Number) WALTER ST. (ACROSS FROM # 51)0

Cause of fire PRESTO LITE TOURCH

Description of building or occupancy: RANCH HOUSE (UNDER CONSTRUCTION)

Owner of building or occupancy: MANN Y SOUZA

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☒ Fire in dwelling	☒ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	100'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose	2 -14'	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
2	SMOKE EJECTORS				
	& CORD				
2pr	ASBESTORS				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: DID N OT USE

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1, 2 Ladder(s) 1 Rescue(s) 2 Car: _____

Other companies responding: _____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
J. MOLLO	LT E. DI GIULIO	
P. PHILLIPS	R. RATH IER	
	J. LAN E	
	W. DRAPER	

VEHICLE	STATION	ON SCENE
CA PT MURPHY		

REMARKS: PRESTO LITE TOURCH SAFETY VENT BLEW OFF, & IGN ITED SCORCHED CENTER BEA M, PLASTER PIPE SLIGH TLY DAMAGED SMOKE IN CELLAR CARRIED TOURCH OUT & PUT IN SAN D

MEN WORKING FOR CALA LUCA PLUMING & H EA TING CO.

JAY ELLIS & CARL FOLCO

MEN WERE WORKIN G IN THE CELLAR

Lt. Emidio Liuio
SIGNED BY:

P. PHILLIPS
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 456 N. P. File # 1879

Date: 8 (MONTH) 30 (DAY) 73 (YEAR)

Time alarm received 7:12 P M Number of miles traveled 3

Time back in service ____ M

Time back at station 7:21 P M

Alarm received by: Box # ____ Phone XX Other ____ (Describe)

Location of alarm: (Street and Number) BARBARA ANN DR.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) 1 Ladder(s) ____ Rescue(s) ____ Car: 78

Other companies responding: ____

MEN RESPONDING TO ALARM: (Put Names Under Proper Spaces Provided)

ENGINE(S) #	LADDER(S) #	RESCUE #
E. PELLAND		
D. FORTIN		
F. BURSIE		
J. BOREK		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT J. MURPHY	
	W. DRAPER	

REMARKS: CALL FOR B RUSH FIRE CODE BLUE

E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.