NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 269 N. P. File # 10:31

Date: 5/1/73
MONTH DAY YEAR

Time alarm received 9:42 A M Number of miles traveled 0

Time back in service ____ M

Time back at station 10:41 A M

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

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

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: HILLSIDE THEATER & POST OIFFICE BUILDINGS.

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)		SEPICAL DETAIL

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	14'	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. E. DI GIULIO	
	B. DI GIULIO	

VEHICLE	STATION	ON SCENE
	J. MOLLO	
	W. DRAPER	

REMARKS: POLICE CALLED WANTED TO GET ON ROOF OF POST OFFICE TO INVESTIGATE & OLSO CHEEK OWT THEATER.

Bernard Di Giulio
SIGNED BY:

LT. E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 270 N. P. File # 1043

Date: 5 (MONTH) 1 (DAY) 73 (YEAR)

Time alarm received 9:00 P M Number of miles traveled 2

Time back in service 9:08 P M

Time back at station 9:14 P M

Alarm received by: Box # 128 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) STELLA & ELMORE

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
	NONE				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1, 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 E DI GIULIO	CAPT C. SALISBURY	
J. MOLLO	D. MARCIANO	
E. PELLAND	J. BOREK	
C. ZAHN	D. BAZZLE	
D. FORTIN	T. RUSSO	
J. LANE	R. PARENTEAU	
VEHICLE	**STATION**	**ON SCENE**
CHIEF E DI GIULIO	LT R. PAQUET	
	K. DI GIULIO	
	T. PERNA	
	F. ROTELLA	

REMARKS: FIRE WAS ON JACKSONIA DR. SMALL BRUSHFIRE OUT ON ARRIVAL
BOX PULLED

Lt. E. DiGiulio
SIGNED BY:

JOHN MOLLO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 271 N. P. File # 1049

Date: 5/2/73
MONTH DAY YEAR

Time alarm received 1:18 P M
Time back in service 1:45 P M
Time back at station 1:50 P M

Number of miles traveled 5

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

Location of alarm: (Street and Number) REAR 19 ~~WEST~~ WRIGHT 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	XX ☐ Code Yellow	☐ Water emergency
XX ☐ 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		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
1	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 20

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		
J. MOLLO		
B. DI GIULIO		
P. PHILLIPS		
VEHICLE	**STATION**	**ON SCENE**
	W. DRAPER	
	R. SALISBURY	

REMARKS: SMALL AREA, HEAVY BRUSH.

Bernard Di Giulio
SIGNED BY:

J. MOLLO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 272 N. P. File # 1052

Date: 5/2/73
MONTH DAY YEAR

Time alarm received 8:05 P M

Time back in service 8:08 P M

Time back at station 8:15 P M

Number of miles traveled 4

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

Location of alarm: (Street and Number) 309 fruit hill 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) #1,2,6. Ladder(s) #1. Rescue(s) 1,2,1a. Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. C. SALISBURY	
CAPT. J. MURPHY	LT. R. PAQUET	
LT. E. DI GIULIO	R. SALISBURY	
J. MOLLO	F. BURSIE	
E. PELLAND	D. MARCIANO	
C. ZAHN	J. BOREK	
D. FORTIN	R. IAFRATE	
T. RUSSO	D. BAZZLE	
B. DI GIULIO	R. RATHIER	
	H. DARBY	
VEHICLE	**STATION**	**ON SCENE**
	K. MIDDLEMAN	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 273 N. P. File # 1055

Date: 5/2/73
MONTH DAY YEAR

Time alarm received 9:34 P M

Time back in service 9:37 P M

Time back at station 9:44 P M

Number of miles traveled 2

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

Location of alarm: (Street and Number) 17 JUSTICE 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) #2.1. 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 #
CAPT. J. MURPHY	CAPT. C. SALISBURY	
LT. E. DI GIULIO	LT. R. PAQUET	
E. PELLAND	J. MOLLO	
C. ZAHN	T. PERNA	
D. FORTIN	R. SALISBURY	
T. RUSSO	R. PARENTEAU	
B. DI GIULIO	F. BURSIE	LADDER #1
	D. MARCIANO	D. BAZZLE
	J. BOREK	R. RATHIER
	R. IAFRATE	H. DARBY
VEHICLE	**STATION**	**ON SCENE**
	CHIEF E. DI GIULIO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE FROM ENGINE#2.

Bernard Di Giulio
SIGNED BY:

CAPT. J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 274 N. P. File # 1057

Date: 5 (MONTH) 3 (DAY) 73 (YEAR)

Time alarm received 3:20 P M Number of miles traveled 17

Time back in service 4:34 P M

Time back at station 4:40 P M

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

Location of alarm: (Street and Number) RANDELL RES.

Cause of fire SET

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: STATE

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
XX 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	400'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
4	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	PORTABLE RADIO				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 50

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: DEPT OF NATURAL RESOURES (!1 TRUCK & CAR)

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E DI GIULIO		
D. FORTIN		
P. PHILLIPS		
K. MIDDLETON		
D. BAZZLE		
B. DI GIULIO		
R. SALISBURY		
VEHICLE	**STATION**	**ON SCENE**
W. DRAPER	J. MOLLO	

REMARKS: TWO DIFFERENT FIRES SET FROM ROAD, SPECIAL SIGNAL FOR ENG 3 #& 4 . FORESTERY DEPT RESPONED WITH ONE TRUCK

Lt. E. DI GIULIO
SIGNED BY:

PVT. B DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 275 N. P. File # 1058

Date: 5 (MONTH) 3 (DAY) 73 (YEAR)

Time alarm received 5:40 P M Number of miles traveled 4

Time back in service 6:27 P M

Time back at station 6:32 P M

Alarm received by: Box #6122 Phone [redacted] Other _____ (Describe)

Location of alarm: (Street and Number) REAR OF GREYSTONE SCHOOL

Cause of fire SET

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
XX 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
6	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 & 6 Ladder(s) 1 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	CAPT C SALISBURY	
LT E DI GIULIO	LT R PAQUET	
E. PELLAND	K. MIDDLETON	
J. LANE	P. RUGGIANO	
D. BAZZLE		
VEHICLE	**STATION**	**ON SCENE**
D. FORTIN	G. KENNAWAY	
H. DARBY	F. ROTELLA	
D. MARCIANO	W. DRAPER	
R. SALISBURY		

REMARKS: FAST MOVING FIRE FROM REAR OF SCHOOL TO JOSLIN ST.
SPECIAL SIGNAL FOR ENG 6

Lt. E. DiGiulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 276 N. P. File # 1060

Date: 5 (MONTH) 3 (DAY) 73 (YEAR)

Time alarm received 9:55 P M

Time back in service 9:58 P M

Time back at station 10:05 P M

Number of miles traveled 2

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

Location of alarm: (Street and Number) 423 FRUI T HILL

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, 1 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	LT R. PAQUET	
LT E DI GIULIO	J. MOLLO	
D. FORTIN	W. LIKOWSKI	
J. BOREK	T. RUSSO	
D. BAZZLE		
T. PERNA		

VEHICLE	STATION	ON SCENE
	E. PELLAND	

REMARKS: CODE BLUE

Lt. E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 277 N. P. File # 1063

Date: 5/4/73 (MONTH / DAY / YEAR)

Time alarm received 3:28 P M Number of miles traveled 2

Time back in service 3:33 P M

Time back at station 3:45P P M

Alarm received by: Box # 125 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) SHERWOOD & BERWICK

Cause of fire SET

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
XX ☒ 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 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: 5

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

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	
J. MOLLO	LT. E. DI GIULIO	
D. FORTIN	B. DI GIULIO	
R. SALISBURY	J. BOREK	
	D. BAZZLE	
	R. RATHIER	
VEHICLE	**STATION**	**ON SCENE**
P. RUGGIANO	W. DRAPER	

REMARKS: SMALL GRASS FIRE OFF SHERWOOD.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 278 N. P. File # 1064

Date: 5/4/73
MONTH DAY YEAR

Time alarm received 4:26 P M
Time back in service 4:56 P M
Time back at station 5:00 P M

Number of miles traveled 3

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

Location of alarm: (Street and Number) REAR 11 BICENTENNIAL WAY

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
XX 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
4	Pump Cans		3 Inch Hose	SALVAGE COVERS	
1	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
PORTABLE RADIO					

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		
LT. E. DI GIULIO		
J. MOLLO		
D. FORTIN		
T: RUSSO		
D. BAZZLE		
R. RATHIER		

VEHICLE	STATION	ON SCENE
	CAPT. J. MURPHY	
	CAPT. C. SALISBURY	
	B. DI GIULIO	
	F. BURSIE	
	J. BOREK	

REMARKS: SMALL AREA IN WOODS.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 279 N. P. File # 1069

Date: 5/4/73
MONTH DAY YEAR

Time alarm received 11:45 P M

Time back in service 11:51 P M

Time back at station 11:59 P M

Number of miles traveled 4

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

Location of alarm: (Street and Number) 16 SHEFFIELD 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) #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		
T. PERNA		
F. BURGIE		
J. BOREK		
J. LANE		
D. BAZZLE		

VEHICLE	STATION	ON SCENE
	D. FORTIN	
	T. RUSSO	
	C. HARRINGTON	
	R. RATHIER	

REMARKS: CODE BLUE

Bernard DiFalco
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 280 N. P. File # 1072

Date: 5/5/73
MONTH DAY YEAR

Time alarm received 1:44 P M Number of miles traveled 3

Time back in service 1:49 P M

Time back at station 2:00 P M

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

Location of alarm: (Street and Number) 26 PACKARD AVE.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: VINNIE SAN ANTONIO

Owner's address: _____

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
	DEODORIZER				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #6.1.2. Ladder(s) #1. Rescue(s) 3XX". 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	LT. R. PAQUET	
(LYM) DEP. CHIEF K. CHILLE	G. KENNAWAY	
E. PELLAND	F. BURSIE	
D. FORTIN	D. BAZZLE	
T. PERNA	S. LA BUTTI (LYM.)	

VEHICLE	STATION	ON SCENE
	P. PALOMBO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE YELLOW FROM ENG. #6.

Bernard Di Giulio

SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 281 N. P. File # 1074

Date: 5/5/73
MONTH DAY YEAR

Time alarm received 5:32 P M Number of miles traveled 2

Time back in service 5:38 P M

Time back at station 5:50 P M

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

Location of alarm: (Street and Number) ELMORE 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): LADDER#1. INVOLVED IN MINOR ACCIDENT AT ELMORE & JACKSONIA

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. C. SALISBURY	
D. FORTIN	LT. R. PAQUET	
J. BOREK	T. PERNA	
T. RUSSO	R. SALISBURY	
D. BAZZLE	F. BURSIE	
P. RUGGIANO		
VEHICLE	**STATION**	**ON SCENE**
	F. ROTELLA	
	A. IEMMA	

REMARKS: NO # GIVEN, CODE BLUE.
LADDER #1, INVOLVED IN MINOR ACCIDENT AT ELMORE & JACKSONNIA.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTERDALE Company Alarm # 282 N. P. File # 1076

Date: 5/5/73 (MONTH / DAY / YEAR)

Time alarm received 6:26 P M

Time back in service 6:28 P M

Time back at station 6:30 P M

Number of miles traveled 2

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

Location of alarm: (Street and Number) 16 BELCOURT

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 #
	CAPT. C. SALISBURY	
	LT. R. PAQUET	
	G. KENNAWAY	
	D. FORTIN	
	J. BOREK	
	P. RUGGIANO	
	D. BAZZLE	
	J. LANE	

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	E. PELLAND	
	T. RUSSO	
	F. ROTELLA	

REMARKS: CODE BLUE FROM ENG.#"2.

Leonard A. Giulio
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTERDALE Company Alarm # 283 N. P. File # 1077

Date: 5* (MONTH) 6 (DAY) 73 (YEAR)

Time alarm received 12:25 A M

Time back in service ____ M

Time back at station 2:08 A M

Number of miles traveled 7

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

Location of alarm: (Street and Number) 430 FRUIT HILL AVE

Cause of fire ELECTRIAL

Description of building or occupancy: 2 STORY DWELLING

Owner of building or occupancy: ST. MARY HOME

Owner's address: FRUIT HILL AVE

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
[X] Fire in building	[X] 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	75	Aerial
	Dry Chemical	200'	1½ Inch Hose	1	Over 35 Feet
	Foam	250'	2½ Inch Hose	2	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)	2	HANDLIGHTS		Other Equipment
2	AXES	1	HOSE CLAMP		
1	PEIRCING APPLICATOR				
1	PIKE POLE				

APPARATUS REPORT

Working time of pump: Hours: 1 HR minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF DI GIULO	CAPT. SALISBURY	
CAPT. MURPHY	LT. PAQUET	
J. MOLLO	F. BURSIE	
J. BOREK	J. LANE	
T. PERNA	R. RATHIER	
	R. SALISBURY	
VEHICLE	**STATION**	**ON SCENE**
D. FORTIN	C. ZAHN	
H. DARBY	D. BAZZLE	
J. MURPHY SR.		
F. ROTELLA		

REMARKS: CODE RED 2 STORY WOOD FRAME STRUCTURE, FIRE DAMAGE TO REAR UPSTAIRS ROOM AND ROOF. WATER DAMAGE THROUGHOUT.

Charles Salisbury
SIGNED BY:

CHIEF DI GUILO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTERDALE Company Alarm # 284 N. P. File # 1080

Date: 5 (MONTH) - 6 (DAY) - 73 (YEAR)

Time alarm received 7:40 P M

Time back in service 7:57 P M

Time back at station 8:00 P M

Number of miles traveled 5

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

Location of alarm: (Street and Number) 21 ELMORE ST.

Cause of fire _____

Description of building or occupancy: CAR FIRE

Owner of building or occupancy: DAVID ADAMS

Owner's address: 18 SEDAN ST PROV. R.I.

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	50'	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
1	CROWBAR				
1 PR	ASBESTO GLOVES				

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: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF DI GIULIO		
LT. DI GIULIO		
G. KENNAWAY		
F. BURSIE		
T. RUSSO		
R. SALISBURY		

VEHICLE	STATION	ON SCENE
D. FORTIN	CAPT. MURPHY	
D. BAZZLE	CAPT. SALISBURY	
	C. HARRINGTON	
	R. IAFRATE	
	T. PERNA	
	W. DRAPER	

REMARKS: CAR COMPLETLEY BURNT UNDER HOOD.
OWNER DAVID ADAMS 18 SEDAN ST. PROV. R.I.
R.I. REG. CR 516 64 CHEV. BLACK CONV.
NO INS.

Charles Salvadore
SIGNED BY:

CHIEF DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTERDALE Company Alarm # 285 N. P. File # 1081

Date: 5 - 6 - 73
MONTH DAY YEAR

Time alarm received 9:15 P M Number of miles traveled 4

Time back in service _____ M

Time back at station 9:30 P M

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

Location of alarm: (Street and Number) 1 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	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe) DUMPSTER		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	50'	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
1	HANDLIGHT				
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 #
LT. DI GIULIO		
C. ZAHN		
G. KENNAWAY		
C. HARRINGTON		
J. BOREK		
J.LANE		
D. BAZZLE		
D. FORTIN		
T. PERNA		
VEHICLE	**STATION**	**ON SCENE**
CHIEF DI GIULIO	CAPT. MURPHY	
CAPT. SALISBURY	LT. PAQUET	
	E. PELLAND	
	F. BURSIE	
	R. IAFRATE	
	T. RUSSO	

REMARKS: CODE YELLOW DUMPSTER

Charles Salisbury
SIGNED BY:

LT. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTERDALE Company Alarm # 286 N. P. File # 1082

Date: 5 - 6 - 73
MONTH DAY YEAR

Time alarm received 9:57 P M Number of miles traveled 4

Time back in service 10:04 P M

Time back at station 10:15 P M

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

Location of alarm: (Street and Number) POLY 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) INVESTAGATION		

	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 DI GIULIO		
CAPT. MURPHY		
G. KENNAWAY		
D. FORTIN		
F. BURSIE		
J. BOREK		
D. BAZZLE		
R. RATHIER		
T. RUSSO		

VEHICLE	STATION	ON SCENE
	CAPT. SALISBURY	
	LT. PAQUET	
	P. RUGGIANO	
	T. PERNA	
	R. IAFRATE	

REMARKS: CODE BLUE

Charles Salisbury
SIGNED BY:

CHIEF DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 287 N. P. File # 1083

Date: 5/6/73 (MONTH / DAY / YEAR)

Time alarm received 10:04 P M Number of miles traveled 4

Time back in service 10:10 P M

Time back at station 10:15 P M

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

Location of alarm: (Street and Number) 34 STELLA 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)		INVESTGATION

	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		
CAPT. J. MURPHY		
G. KENNAWAY		
D. FORTIN		
T. RUSSO		
F. BURSIE		
J. BOREK		
D. BAZZLE		
R. RATHIER		
VEHICLE	**STATION**	**ON SCENE**
	CAPT. C. SALISBURY	
	LT. R. PAQUET	
	T. PERNA	
	R. DAFRATE	
	P. RUGGIANO	

REMARKS: CODE BLUE

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 288 N. P. File # 1085

Date: 5/6/73
MONTH DAY YEAR

Time alarm received 11:25 PM Number of miles traveled 3

Time back in service 11:30 PM

Time back at station 11:35 PM

Alarm received by: Box # 516 Phone _____ Other _____ (Describe)

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

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) #6, 2, 1. 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 #
CAPT. J. MURPHY	LT. R. PAQUET	
D. FORTIN	F. BURSIE	
T. RUSSO	B. TARRATE	
J. BORFX	B. RAINIER	
D. BAZZLE		
VEHICLE	**STATION**	**ON SCENE**
	T. PERNA	

REMARKS: CODE BLUE

Bernard W. Giulio
SIGNED BY:

CAPT. J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 289 N. P. File # 1087

Date: 5/7/73
MONTH DAY YEAR

Time alarm received 7:22 A M Number of miles traveled 0

Time back in service 7:28 A M

Time back at station 7:30 A M

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

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

Cause of fire SHORT

Description of building or occupancy: _____

Owner of building or occupancy: MICHAED ALLAN

Owner's address: 1963 smith st. NO.PROV. R.I.

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
	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): HOUSING FOR FAN BELTS BROKE.

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. C. SALISBURY		
J. MOLLO		
B. DI GIULIO		
F. BURSIE		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	~~LT. E. DI GIULIO~~ ~~P. PHILLIPS~~ W. DRAPER	

REMARKS: REAR SEAT BURNED. SHORT FROM BATT: OUT ON ARRIVEL.

MICHAEL ALLAN — LX142 R.I.
1963 SMITH ST. — 1962 VW.
NO. PROV. R. I.

Bernard Di Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 290 N. P. File # 1098

Date: 5 (MONTH) 8 (DAY) 73 (YEAR)

Time alarm received 3:15 P M Number of miles traveled 9

Time back in service 3:21 P M

Time back at station 3:26 P M

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

Location of alarm: (Street and Number) CRAGIE & SAVIN

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 (XX)	☐ 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	75'	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: 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 #
LT E DI GIULIO		
LT R. PAQUET		
J. MOLLO		
D. BAZZLE		
R. SALISBURY		
B. DI GIULIO		

VEHICLE	STATION	ON SCENE
W. DRAPER		

REMARKS: SMALL AREA SIDE OF HOUSE

Lt. Emilio Giulio
SIGNED BY:

LT R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 291 N. P. File # 1100

Date: 5 (MONTH) 8 (DAY) 73 (YEAR)

Time alarm received 6:00 P M Number of miles traveled 3

Time back in service 6:28 P M

Time back at station 6:35 P M

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

Location of alarm: (Street and Number) 32 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
4	Pump Cans		3 Inch Hose	SALVAGE COVERS	
2	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
	PORTABLE RADIO				

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		
E. PELLAND		
D. FORTIN		
D. BAZZLE		

VEHICLE	STATION	ON SCENE
LT E DI GIULIO	CAPT C. SALISBURY	
JEFF MURPHY	F. ROTELLA	
F. BURSIE	W. DRAPER	
R. RATHIER		
S. LEBUDI (LYM)		

REMARKS: SMALL AREA AT END OF BERWICK ST. BOX 125 WAS PULLED FOR THIS SAME FIRE

Lt. Ernie Di Giulio
SIGNED BY:

ED. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 292 N. P. File # 1101

Date: 5 (MONTH) 8 (DAY) 73 (YEAR)

Time alarm received 6:07 P M

Time back in service 6:26 P M

Time back at station 6:30 P M

Number of miles traveled 1

Alarm received by: Box # 125 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) SHERWOOD & BERWICK

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) 1 & 2 Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT C. SALISBURY	R. RATHIER	
CHIEF E. DI GIULIO	V. DI ORTO SR.(LYM.)	
E. PELLAND	V. DI ORIO JR.(LYM.)	
D. FORTIN	W. DRAPER	
D. BAZZLE		
VEHICLE	**STATION**	**ON SCENE**
S. LEBUDI (LYM)	F. ROTELLA	
JEFF MURPHY		
F. BURSIE		

REMARKS: BOX PULLED FOR SAME FIRE ENG. 1 WAS AT

SIGNED BY:

WILLIAM DRAPER
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 293 N. P. File # 1109

Date: 5/9/73
MONTH DAY YEAR

Time alarm received 8:13 P M
Time back in service 8:16 P M
Time back at station 8:21 P M

Number of miles traveled 1

Alarm received by: Box # 153 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) WOONASQUATUCKET & CHANDLER

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, 6. Ladder(s) #1. 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	LT. R. PAQUET	
CAPT. J. MURPHY	T. PERNA	
LT. E. DI GIULIO	F. BURSIE	
E. PELLAND	D. MARCIANO	
C. ZAHN	J. BOREK	
D.FORTIN	J. LANE	
T. RUSSO	R. IAFRATE	
	D. BAZZLE	
	R. RATHIER	
VEHICLE	**STATION**	**ON SCENE**
	B. DI GIULIO	
	W. DRAPER	

REMARKS: CODE BLUE

Bernard Di Giulio
SIGNED BY:

CAPT. J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 294 N. P. File # 1114

Date: 5/10/73
MONTH DAY YEAR

Time alarm received 6:08 P M Number of miles traveled 2

Time back in service 6:18 P M

Time back at station 6:23 P M

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

Location of alarm: (Street and Number) BERWICK 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
XX ☐ 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. 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		
LT. E. DI GIULIO		
LT. R. PAQUET		
E. PELLAND		
D. FORTIN		
T. RUSSO		
D. BAZZLE		
S. LABUITTI (LYM.)		

VEHICLE	STATION	ON SCENE
	F.ROTELLA	
	W.DRAPER	
	A:IEMMA	

REMARKS: SMALL AREA PUTOUT BY GARDEN HOSE BEFORE ENG.#1.ARRIVED.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 295 N. P. File # 1116

Date: 5/10/73
MONTH DAY YEAR

Time alarm received 9:18 P M Number of miles traveled 5

Time back in service ____ M

Time back at station 9:50 P M

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

Location of alarm: (Street and Number) SMITHFIELD RD

Cause of fire ____

Description of building or occupancy: Towal Dump

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
XX 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: #1.

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		
E. PELLAND		
D. FORTIN		
C. ZAHN		
T. RUSSO		
D. BAZZLE		
R. RATHIER		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
J. BOREK	J. MOLLO	
F. ROTELLA	B. DI GIULIO	
	P. RURGGIANO	
	R. MARWELL	

REMARKS: CALLED FOR PUBLIC WORKS BULLDOZER. BY ORDER OF CHIEF.

Bernard Di Giulio
SIGNED BY:

LT. E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 296 N. P. File # 1122

Date: 5/11/73
MONTH DAY YEAR

Time alarm received 11:01 A M Number of miles traveled 3

Time back in service ____ M

Time back at station 11:22 A M

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

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

Cause of fire BOMBE SCARE

Description of building or occupancy: NORTH PROVIDENCE HIGH SCHOOL

Owner of building or occupancy: TOWN OF NORTH PROVIDENCE

Owner's address: 2008 SMITH ST.

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)		BOMB SCARE

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY	LT. E. DI GIULIO	
J. MOLLO	E. PELLAND	
P. PHILLIPS	W. DRAPER	
B. DI GIULIO		

VEHICLE	STATION	ON SCENE

REMARKS: CODE BLUE BOMB SCARE.

ENG. #3,4. ON ET ANOTHER RUN.

Bernard Di Giulio
SIGNED BY:

CAPT. J. MURTHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 297 N. P. File # 1124

Date: 5 (MONTH) 11 (DAY) 73 (YEAR)

Time alarm received 3:05 P M Number of miles traveled 1

Time back in service 3:20 P M

Time back at station 3:23 P M

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

Location of alarm: (Street and Number) 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)
☐ 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
	NONE				

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		
E. PELLAND		
P. PHILLIPS		
B. DI GIULIO		

VEHICLE	STATION	ON SCENE
	~~LT E. DI GIULIO~~	
	~~W. DRAPER~~	
	~~F. ROTELLA~~	

REMARKS: RADIATOR HOSE BROKE, STEAM WAS COMEING FROM UNDER HOOD
THERE WAS NO FIRE

E. S. YOUNG
17 TECUMEH ST. PROV, RI
REG. WV 369 RI
67 MER.

~~Lt. Ernest Di Giulio~~
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 298 N. P. File # 1129

Date: 5 (MONTH) 12 (DAY) 73 (YEAR)

Time alarm received 2:30 P M Number of miles traveled 6

Time back in service 2:52 P M

Time back at station 255 P M

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

Location of alarm: (Street and Number) SAVOY 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	300'	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: 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		
J. MOLLO		
E. PELLAND		
G. KENNAWAY		
D. FORTIN		
D. BAZZLE		
T. PERNA		

VEHICLE	STATION	ON SCENE
	CAPT C. SALISBURY	
	LT E. DI GIULIO	
	T. RUSSO	
	R. SALISBURY	
	W. DRAPER	

REMARKS: AREA IN WOODS NEAR BALLFIELD AT END OF SAMOY ST.

Lt. Ernest E. Sinclair
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 299 N. P. File # 1133

Date: 5 (MONTH) 13 (DAY) 73 (YEAR)

Time alarm received 8:00 P M Number of miles traveled 3

Time back in service 8:30 M

Time back at station 8:35 M

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

Location of alarm: (Street and Number) 1755 SMITH ST.

Cause of fire RUBBISH

Description of building or occupancy: DUNKIN DONUTS

Owner of building or occupancy: GEORGE A PSILOPOULOS

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	50'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose	24 & 14	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
2	SMOKE EJECTORS				
	CORD				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 5

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1, 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 #
CHIEF E. DI GIULIO	CAPT C. SALISBURY	
E. PELLAND	LT R. PAQUET	
C. HARRINGTON	J. MOLLO	
J. BOREK	F. BURSIE	
T. RUSSO	T. PERAN	
R. SALISBURY	R. CRANSHAW	
VEHICLE	**STATION**	**ON SCENE**
R. GUERTIN	CAPT J. MURPHY	
P. RUGGIANO	D. MARCIANO	
R. PARENTEAU	D. BAZZLE	
W. DRAPER	F. ROTELLA	
	A. IEMMA	
	B. DI GIULIO	

REMARKS: FIRE STARTED IN PLASTIC TRASH CONTAINER UNDER SHELVE IN STORAGE ROOM. MINOR DAMAGE TO STOCK & SHELVING. LIGHT SMOKE IN KITCHEN AREA. (ONE 1) DRY POWDER EXT. USED BY OWNER BEFORE WE ARRIVED OWNER BURNED RIGHT HAND, WAS TREATED BY P. RUGGIANO

Lt. Ernest A. DiGiulio
SIGNED BY:

CHIEF ED. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENT EDALE Company Alarm # 300 N. P. File # 1135

Date: 5 (MONTH) 13 (DAY) 73 (YEAR)

Time alarm received 2:58 P M Number of miles traveled 4

Time back in service 3:05 P M

Time back at station 3:15 P M

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

Location of alarm: (Street and Number) HIGH SERVICE AVE

Cause of fire _____

Description of building or occupancy: FATIMA HOSP.

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
	NONE				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1,2,3,4,5,6 Ladder(s) 1 & 2 Rescue(s) 1,2,3 Car: 1

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	
LT E. DI GIULIO	J. MOLLO	
E. PELLAND	K. MIDDLETON	
C. ZAHN	D. MARCIANO	
D. FORTIN	R. RATHIER	
D. BAZZLE	P. RUGGIANO	
	G. BULIPTT	
	S. LIBUTTI (LYM)	
	W. DRAPER	
VEHICLE	**STATION**	**ON SCENE**
	B. DI GIULIO	

REMARKS: CALL FOR FIRE AT HOSP. BACK IN SERVICE PER. ORDER OF CAR 1

SIGNED BY: Lt. E. Di Giulio

CHIEF ED. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 301 N. P. File # 1136

Date: 5 (MONTH) 13 (DAY) 73 (YEAR)

Time alarm received 6:18 P M Number of miles traveled 1

Time back in service 6P24 P M

Time back at station 6:30 P M

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

Location of alarm: (Street and Number) MORGAN AVE. (REAR OF 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	☒ 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 Ladder(s) 1 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	CAPT C. SALISBURY	
CAPT J. MURPHY	LT E. DI GIULIO	
E. PELLAND	J. MOLLO	
C. ZAHN	D. MARCIANO	
D. FORTIN	D. BAZZLE	
K. MIDDLETON	P. RUGGIANO	
T. RUSSO	F. ROTELLA	
	W. DRAPER	

VEHICLE	STATION	ON SCENE

REMARKS: CODE BLUE

Lt. Ernie Di Giulio
SIGNED BY:

CHIEF ED. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 302 N. P. File # 1139

Date: 5 (MONTH) 13 (DAY) 73 (YEAR)

Time alarm received 10:00 P M Number of miles traveled 2

Time back in service 10:05 P M

Time back at station 10:10 P M

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

Location of alarm: (Street and Number) MORGAN AVE. (REAR OF 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	☒ 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 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	CAPT C SALISBURY	
LT E. DI GIULIO	J. MOLLO	
E. PELLAND	F. BURSIE	
C. ZAHN	D. MARCIANO	
G. KENNAWAY	R. RATHIER	
T. RUSSO	T. PERNA	
VEHICLE	**STATION**	**ON SCENE**
P. RUGGIANO		

REMARKS: CODE BLUE

SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 303 N. P. File # 1140

Date: 5 (MONTH) 13 (DAY) 73 (YEAR)

Time alarm received 11:11 P M

Time back in service 11:17 P M

Time back at station 11:30 P M

Number of miles traveled 2

Alarm received by: Box # 525 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) WOON. AVE & EMMAUEL

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	☐ 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 #
CAPT J. MURPHY	CAPT C. SALISBURY	
E. PELLAND	LT R. PAQUET	
D. FORTIN	F. BURSIE	
D. MARCIANO	J. BOREK	
T. RUSSO	D. BAZZLE	
	R. RATHIER	

VEHICLE	STATION	ON SCENE

REMARKS: BOX PULLED FOR MEDICAL AID. PERSON WANTED TO GO TO HOSP.

SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 304 N. P. File # 1145

Date: 5 (MONTH) 14 (DAY) 73 (YEAR)

Time alarm received 11:08 P M Number of miles traveled 3

Time back in service 11:14 P M

Time back at station 11:20 P M

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

Location of alarm: (Street and Number) 17 LAWRENCE RD.

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 #
CAPT J. MURPHY	CAPT J. MURPHY	
	LT R. PAQUET	
	F. BURSIE	
	R. RATHIER	
	T. PERNA	

VEHICLE	STATION	ON SCENE
	J. MOLLO	
	E. PELLAND	
	D. FORTIN	
	T. RUSSO	
	A. IENMA	

REMARKS: CODE BLUE

Lt. Ennis DeGiulio
SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 305 N. P. File # 1148

Date: 5 (MONTH) 15 (DAY) 73 (YEAR)

Time alarm received 7.45 A M Number of miles traveled 1

Time back in service 8:34 A M

Time back at station 8:40 A M

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

Location of alarm: (Street and Number) 108 BOURNE AVE

Cause of fire BOILER

Description of building or occupancy: _____

Owner of building or occupancy: LOUISE BOUCHREAU

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	
2	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				
1	HAND LIGHT				

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: 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	
G. KENNAWAY	R. RATHIER	
P. PHILLIPS	D. BAZZIE	
B. DI GIULIO		
VEHICLE	**STATION**	**ON SCENE**
W. DRAPER	F. ROTELLA	

REMARKS: BOILER, OVERFLOW OF OIL. WAS BURNING ON THE OUTSIDE OF THE BOILER, SHUT IT OFF, & CALLED OIL MAN & LET IT BURN OFF SMOKE IN CELLAR LIGHT

Lt. Ernie Di Giulio
SIGNED BY:

LT E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 306 N. P. File # 1154

Date: 5 (MONTH) 16 (DAY) 73 (YEAR)

Time alarm received 7:31 P M Number of miles traveled 17

Time back in service ____ M

Time back at station 7:40 P M

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

Location of alarm: (Street and Number) REAR OF 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
2	Pump Cans		3 Inch Hose	SALVAGE COVERS	
1	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: 78

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
E.PELLAND	LT E. DI GIUIIO	
C. ZAHN	F. BURSIE	
D. FORTIN	R. SALISBURY	
D. BAZZLE	W. DRAPER	
R. RATHIER		
T. RUSSO		
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO	B. DI GIULIO	
J. MOLLO		
LT R. PAQUET		

REMARKS: SMALL BRUSH FIRE REAR OF SCHOOL

Lt. Ernie Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 307 N. P. File # 1155

Date: 5 (MONTH) 16 (DAY) 73 (YEAR)

Time alarm received 8:01 P M

Time back in service 8:05 P M

Time back at station 8:15 P M

Number of miles traveled 17

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

Location of alarm: (Street and Number) 52 CONGRESS 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: 78

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
E. PEILAND	F. BURSIE	
C. ZAHN	D. MARCIANO	
D. FORTIN	T. PERNA	
D. BAZZLE	B. DI GIULIO	
R. BATHIER		
T. RUSSO		
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO	LT R. PAQUET	
CAPT J. MURPHY	F. ROTELLA	
J. MOLLO	W. DRAPER	

REMARKS: CODE BLUE

E. Emilio Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 308 N. P. File # 1167

Date: 5/18/73
MONTH DAY YEAR

Time alarm received 6:08 P M Number of miles traveled 2

Time back in service 6:15 P M

Time back at station 6:21 P M

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

Location of alarm: (Street and Number) 2 POLY 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, 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	J. MOLLO	
E. PELLAND	F. BURSIE	
R. SALISBURY	J. BOREK	
K. MIDDLTON	D. BAZZLE	
D. MARCIANO		

VEHICLE	STATION	ON SCENE
	B. DI GIULIO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE

Bernard W. Gudis
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NO. PROVIDENCE FIRE DEPARTMENT

– RESCUE REPORTS –

DATE: 5/19/73 TIME: ARRIVED 3:25 P.M. RETURNED 3:30 PM.

NAME: Kevin Noonan AGE: 18

ADDRESS: 729 Mineral Spring Ave ALARM BY: Patient

Pawtucket

LOCATION OF RESCUE Subject brought to Centredale Station

EXAMINATION

SKULL *

EYES *

EARS *

NOSE *

MOUTH *

CHEST *

ABDOMEN *

UPPER EXTREMITIES *

LOWER EXTREMITIES * ✓ Left Heel Minor Laceration

POSITION OF PATIENT WHEN FOUND: Walked into station

WAS PATIENT CONSCIOUS? Yes

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN) Yes

PATIENT TRANSPORTED TO: no

IF PATIENT WAS NOT TRANSPORTED EXPLAIN: Below

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

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

Patient droped off by Public works. Cut while working on ZAC Program cleaning river. Small laceration Left Heal cleaned + bandaged 2 3'x3's Adhesive Tape Alcohol

SIGNED: Edward Pelland OFFICER IN CHARGE: Frank Burs ie

(over)

RESCUE CO. NO. _____

T. Mollo
F. Bursie
F. Pelland
D. Fortin
C. Zahn

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 309 N. P. File # 1175

Date: 5/19/75 (MONTH / DAY / YEAR)

Time alarm received 4:50 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 5:01 P M

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

Location of alarm: (Street and Number) 16 REDFERN 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	24'	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 #
C. SALISBURY		
E. PELLAND		
R. SALISBURY		
F. ROTELLA		

VEHICLE	STATION	ON SCENE

REMARKS:

Bernard M. Quelo
SIGNED BY:

CAPT. C. SALISBURY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company C NORMDALE Company Alarm # 310 N. P. File # 1178

Date: 5/20/73 (MONTH / DAY / YEAR)

Time alarm received 1:05 A M Number of miles traveled 3

Time back in service 1:11 A M

Time back at station 1:20 A M

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

Location of alarm: (Street and Number) 468 FRUIT HILL 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) #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. C. SALISBURY	
T. PENNA	LT. R. PAQUET	
K. MIDDLETON	E. PELLAND	
P.RUGGIANO	R. SALISBURY	
	F. BURSIE	
	F. ROTELLA	

VEHICLE	STATION	ON SCENE

REMARKS: CODE BLUE FROM ENG. #2.

Richard R. Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NO. PROVIDENCE FIRE DEPARTMENT

– RESCUE REPORTS –

DATE: 5/20/73 TIME: ARRIVED 12:22 P.M. RETURNED 12:30 P.M.

NAME: ANGELO ROSSI AGE: 25

ADDRESS: 49 MARDEN ST. ALARM BY:

CRANSTON

LOCATION OF RESCUE CENTREDALE FIRE STATION

EXAMINATION

SKULL *

EYES *

EARS *

NOSE *

MOUTH *

CHEST *

ABDOMEN *

UPPER EXTREMITIES *

LOWER EXTREMITIES * Piece of SKIN Missing, INDEX FINGER - Right HAND

POSITION OF PATIENT WHEN FOUND: WALK IN TO CENTREDALE STATION

WAS PATIENT CONSCIOUS? YES

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN) YES

PATIENT TRANSPORTED TO: NO

IF PATIENT WAS NOT TRANSPORTED EXPLAIN: HE HAD TO GO BACK TO WORK AT ROSSI COLD CUTS.

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

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

HE HAD A PIECE OF SKIN MISSING ON RIGHT HAND ON THE INDEX FINGER. WE USED 2 STERILE GAUZE PADS ~~#5~~ 20" of ½" ADHESIVE TAPE, 1 PAIR OF SCISSORS TINCTURE MERTHIOLATE AND ONE SWAB.

Angelo Rossi

SIGNED: ~~Charles Harrington~~ OFFICER IN CHARGE: Charles Harrington

RESCUE CO. NO. _____

C. HARRINGTON
D. BAZZLE
D. FORTIN

18.99

25

5/20/13

ANGELO ROSSI
49 MARDEN ST.
CRANSTON

CENTREPAGE FIRE STATION

WORK IN TO CENTREPAGE STATION

YES

YES

NO

HE HAD TO GO BACK TO WORK

AT ROSSI COLD CUTS.

HE HAD A PIECE OF SKIN MISSING ON RIGHT HAND
ON THE INDEX FINGER. MEDED STERILE GAUZE
PADS & 80 "OF" ADHESIVE TAPE. IPAIP OF SCISSORS
THE-TIME MEDICATE AND ONE SWAB.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTRALE Company Alarm # 311 N. P. File # 1182

Date: 5/20/73
MONTH DAY YEAR

Time alarm received 3:45 P M Number of miles traveled 3

Time back in service ____ M

Time back at station 3:55 P M

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

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

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 #
	E. PELLAND	
	C. ZAHN	
	D. FORTIN	
	T. RUSSO	
	F. BURSIE	
	C. HARRINGTON	
	D. BAZZLE	

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT. J. MURPHY	
	T. PERNA	
	R. SALISBURY	
	R. RATHIER	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE

Leonard Di Giulio

SIGNED BY:

F. BURSIE

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTRAL Company Alarm # 312 N. P. File # 1185

Date: 5/20/73 (MONTH / DAY / YEAR)

Time alarm received 10:50 P M

Time back in service 10:57 P M

Time back at station 11:02 P M

Number of miles traveled 4

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

Location of alarm: (Street and Number) OUR LADY OF FATIMA HOSPITALE

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, 3, 4, 5, 6. Ladder(s) #1, 2. Rescue(s) 1, 1A, 2, 3. Car: #1.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY	LT. R. PAQUET	
T. PERNA	J. MOLLO	
C. HARRINGTON	E. PELLAND	
J. LANE	P. BURSIE	
G. BISCELLI (LYM.)	J. BOREK	
VEHICLE	**STATION**	**ON SCENE**
	T. RUSSO	
	B. DI GIULIO	
	D. BAZZLE	
	F. ROTELLA	

REMARKS: CODE BLUE

SIGNED BY:

CAPT. J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 313 N. P. File # 1187

Date: 5 (MONTH) 21 (DAY) 73 (YEAR)

Time alarm received 10:43 P M

Time back in service 10:48 P M

Time back at station 10:55 P M

Number of miles traveled 2

Alarm received by: Box # 511 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) MANNING & WHIPPLE

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
	NONE				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT R. PAQUET	
	E. PELLAND	
	D. FORTIN	
	D. MARCIANO	
	J. BOREK	
	J. LANE	
	D. BAZZLE	
	T. RUSSO	
VEHICLE	**STATION**	**ON SCENE**
F. ROTELLA	CAPT J. MURPHY	
	J. MOLLO	
	C. ZAHN	
	F. BURSIE	
	R. IAFRATE	

REMARKS: CODE BLUE

Lt. Emilio Sirolio
SIGNED BY:

LIEUT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 314 N. P. File # 1190

Date: 5/22/73 (MONTH / DAY / YEAR)

Time alarm received 10:51 P M Number of miles traveled 3

Time back in service 10:55 P M

Time back at station 11:00 P M

Alarm received by: Box # 525 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) woon. & EMMANUEL

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, 1, 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	LT. R. PAQUET	
CAPT. J. MURPHY	D. FORTIN	
E. PELLAND	R. PARENTEAU	
G. ZAHN	F. BURSTE	
T. RUSSO	J. LANE	
J. BOREK	S. LABUTTI (LYM.)	
	W. CARDERELLI (LYM.)	
VEHICLE	**STATION**	**ON SCENE**
R. RATHIER	R.IAFRATE	
	F. ROTELLA	

REMARKS: CODE BLUE

Richard N. Giulio

SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 315 N. P. File # 1191

Date: 5/23/73
MONTH DAY YEAR

Time alarm received 12:18 A M Number of miles traveled 3

Time back in service 12:24 A M

Time back at station 12:30 A M

Alarm received by: Box # 533 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) LAWRENCE & MEADOW BROOK

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	X ☐ 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, 1. 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	LT. R. PAQUET	
CAPT. J. MURPHY	T. PERNA	
E. PELLAND	R. PARENTEAU	
T. RUSSO	D. MARCIANO	
F. BURSIE	R. IAFRATE	
C. HARRINGTON	R. RATHIER	

VEHICLE	STATION	ON SCENE
	F. ROTELLA	

REMARKS: CODE BLUE FROM ENG. #6.

Signed by: Chief E. Di Giulio

SIGNED BY:

CHIEF E.DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 316 N. P. File # 1196

Date: 5/23/73
MONTH DAY YEAR

Time alarm received 11:20 A M Number of miles traveled 1

Time back in service ____ M

Time back at station 11:40 A M

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		XX ☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		CAT IN TREE

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	14'	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				1 PR.	GLOVES

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		
B. DI GIULIO		
P. PHILLIPS		
VEHICLE	**STATION**	**ON SCENE**
	LT. DI GIULIO	

REMARKS: CAT IN TREE.

Bernard Di Giulio
SIGNED BY:

J. MOLLO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 317 N. P. File # 1198

Date: 5 (MONTH) 23 (DAY) 73 (YEAR)

Time alarm received 6:16 P M

Time back in service 6:18 P M

Time back at station 6:23 P M

Number of miles traveled 1

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

Location of alarm: (Street and Number) SMITH ST (REAR OF R. I. SUPPLY AUTO)

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
1	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 #
LT R. PAQUET		
E. PELLAND		
D. FORTIN		
T. RUSSO		

VEHICLE	STATION	ON SCENE
CAPT J. MURPHY	CHIEF E. DI GIULIO	
LT E. DI GIULIO	CAPT C. SALISBURY	
	D. BAZZLE	
	T. PERNA	
	F. ROTELLA	
	W. DRAPER	

REMARKS: RUBBISH BARREL

Lt. Eric Di Giulio
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 318 N. P. File # 1202

Date: 5/24/73
MONTH DAY YEAR

Time alarm received 6:44 P M
Time back in service 6:49 P M
Time back at station 6:54 P M

Number of miles traveled 3

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

Location of alarm: (Street and Number) 39 JUSTICE 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) #6, 1. 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 #
LT. E. DI GIULIO	F. BURSIE	
E. PELLAND	F. ROTELLA	
D. FORTIN		
T. RUSSO		
VEHICLE	**STATION**	**ON SCENE**
CAPT. J. MURPHY	C. ZAHN	
	W. DRAPER	

REMARKS: CODE BLUE FROM ENG. #2.

Bernard W. Gruno

SIGNED BY:

LT. E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 319 N. P. File # ~~1203~~

Date: 5/24/73
MONTH DAY YEAR

Time alarm received 10:16 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 10:21 P M

Alarm received by: Box # 521 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) EMMANUEL 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) ~~#6,1.~~ Ladder(s) ~~#1.~~ Rescue(s) ~~#1,1a,2.~~ Car: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
D. FORTIN	CAPT. J. MURPHY	
T. RUSSO	J. MOLLO	
F. BURSIE	T. PERNA	
J. BOREK	R. RATHIER	
D. BAZZLE		

VEHICLE	STATION	ON SCENE

REMARKS: CODE BLUE FROM ENG.#6.

SIGNED BY:

CAPT. J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 320 N. P. File # 1204

Date: * 5/24/73
MONTH DAY YEAR

Time alarm received 10:35 P M Number of miles traveled 4

Time back in service 10:48 P M

Time back at station 10:55 P M

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

Location of alarm: (Street and Number) 700 SMITHFIELD RD.

Cause of fire AUTO ACCIDENT

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	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		AUTO 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
	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 #
LT. R. PAQUET		
J. MOLLO		
C. ZAHN		
T. RUSSO		
T. PERMA		
F. BURSIE		
J. BOREK		
R. IAFRATE		
J. LANE		
D. BAZZLE R. RATHIER		
VEHICLE	**STATION**	**ON SCENE**
D. FORTIN		

REMARKS: AUTO ACCIDENT, OWNER; ERNEST PLANTE
144 FRUTI HILL AVE.
NO. PROV. R. I.

DRIVER; PAUL PLANTE
144 FRUIT HILL AVE.
NO. PROV. R. I.

CAR REG; R. I. EP153
68 PLYMOUTH

INJURED & TRANSPORTED BY RESCUE#1.
PATRICIA BIAMBRA
FRUIT HILL AVE.

Bernard W. Parker
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 321 N. P. File # 1207

Date: 5/25/73
MONTH DAY YEAR

Time alarm received 12007 A M Number of miles traveled

Time back in service M

Time back at station 1200 A M

Alarm received by: Box # 431 Phone Other (Describe)

Location of alarm: (Street and Number) TAYLOR & WHIPPLE CT.

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, 1. 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 #
LT. R. PAQUET	CHIEF E. DI GIULIO	
E. PELLAND	K. MIDDLETON	
C. ZAHN	J. BOREK	
G. KENNAWAY	J. LANE	
T. PERNA	R. IAFRATE	
	D. BAZZLE	

VEHICLE	STATION	ON SCENE
	D. FORTIN	
	R. RATHIER	

REMARKS: CODE BLUE FROME ENG.#2. (JUMPED BOX)
ENG.#1, LADDER#1, DIDN'T LEAVE STATION.

Bernard Mc Gushin
SIGNED BY:

LT. R.PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 322 N. P. File # 1209

Date: 5/26/73 (MONTH DAY YEAR)

Time alarm received 4:29 P M Number of miles traveled 1

Time back in service 4:37 P M

Time back at station 4:40 P M

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

Location of alarm: (Street and Number) 1969 SMITH ST.

Cause of fire COOKING

Description of building or occupancy: 3STORY WOODEN APTS. ALFA MANTON 3rd. FLOOR

Owner of building or occupancy: L. MILANO TELE. 231-4132

Owner's address: _____

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) STOVE		

	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. C. SALISBURY	
LT. E. DI GIULIO	LT. PAQUET	
E. PELLAND	P. RUGGIANO	
D. FORTIN	W. DRAPER	
T. RUSSO		
D. BAZZLE		
VEHICLE	**STATION**	**ON SCENE**
	F. ROTELLA	

REMARKS: OUT ON ARRIVEL. GREASE FROM COOKING ON STOVE.
NO DAMAGE.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 323 N. P. File # 1210

Date: 5/26/73
MONTH DAY YEAR

Time alarm received 8:10 P M Number of miles traveled 2

Time back in service 8:31 P M

Time back at station 8:39 P M

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

Location of alarm: (Street and Number) MINERAL SPRING & BROWN AVES.

Cause of fire AUTO ACCIDENT

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	☐ 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
				1	ROPE

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, 1a. Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. C. SALSIBURY		
LT. DI GIULIO		
J.MOLLO		
C. ZAHN		
G. KENNAWAY		
F. BURSIE		
J. LANE		
D. BAZZLE		
P. RUGGIANO		
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO		
R. SALISBURY		
W. DRAPER		

REMARKS: AUTO ACCIDENT. TWO CARS.

1958 VOLKSWAGON R.I. GP334

1969 COUGER R. I.JT136

JOHN TAYLOR

STERLING DR. HARMONY, R.I.

Bernard Di Giulio

SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 324 N. P. File # 1211

Date: 5/27/73
MONTH DAY YEAR

Time alarm received 1:24 A M Number of miles traveled 4

Time back in service 1:33 A M

Time back at station 1:40 A M

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

Location of alarm: (Street and Number) 200 HIGH SERVICE AVE.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: FATIMA HOSP.

Owner's address: SAME

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) #2,1,3,4,5,6. Ladder(s) #1,2. 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	CAPT. C. SALISBURY	
G. KENNAWAY	LT. R. PAQUET	
R. SALISBURY	J. MOLLO	
C. HARRINGTON	E. PELLAND	
J. BOREK	D. BAZZLE	
J. LANE		
R. RATHIER		
VEHICLE	**STATION**	**ON SCENE**
C. ZAHN	T. PERNA	
	F. ROTELLA	
	A. IAMMA	

REMARKS: CODE BLUE FROM ENG.#2.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 325 N. P. File # 1214

Date: 5/27/73
MONTH DAY YEAR

Time alarm received 2:07 P M Number of miles traveled 1

Time back in service 2:15 P M

Time back at station 2.20 P M

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

Location of alarm: (Street and Number) SMITH & BY *-PASS

Cause of fire AUTO ACCIDENT

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
				FRIST AID EQUIP.	

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 #
LT. E. DI GIULIO		
R. SALISBURY		
C. HARRINGTON		
VEHICLE	**STATION**	**ON SCENE**
J. MOLLO		
J. BOREK		
P. RUGGIANO		
F. ROTELLA		
W. DRAPER		
A. IAMMA		

REMARKS: CAR CROSSED ISLAND FROM WOON.AVE. HIT SIGNCROSSED OVER SMITH ST. &LANDED NEXET TOORGAN BUILDING.

1968 CHEV. NOVA R.I.RU305

Bernard Di Giulio
SIGNED BY:

LT. E. DI GIULIO
PERSON IN CHG.

NO. PROVIDENCE FIRE DEPARTMENT
– PRIMARY RESCUE REPORTS –

DATE: 5/27/73 TIME: ARRIVED 2:07 P.M. RETURNED 2:20 P.M.

NAME: EUGENE MACOMBER AGE: 17 Yrs.

ADDRESS: 29 WENDELL ST. PROV. ALARM BY: POLICE

LOCATION OF RESCUE SMITH STREET * BY PASS NORTH PROV.

EXAMINATION

SKULL * O.K.

EYES * O..K.

EARS * O.K.

NOSE * LACERATED NOSE.

MOUTH * SMALL LACERATION

CHEST * O.K.

ABDOMEN * O.K.

UPPER EXTREMITIES * LACERATION RIGHT ARM. POSS. FRACTURE RIGHT ARM.

LOWER EXTREMITIES * O.K.

POSITION OF PATIENT WHEN FOUND: THRASHING ABOUT ON FRONT SEAT OF CAR.

WAS PATIENT CONSCIOUS? SEMI.

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN)

PATIENT TRANSPORTED TO: ROGER WILLIAMS GEN HOSPT.

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)

DRESSING APPLIED TO LAC. ON RIGHT ARM, AND ALSO PLASTIC AIR SPLINT ON RIGHT ARM. USED 5X8 DRESSING TO CLEAR BLOOD FROM FACE. PATIENT WAS THARSHING ABOUT AS THAT OF ONE HAVING AN EPILEPLIC FIT.

SIGNED: Pasco Ruggiano OFFICER IN CHARGE: PASCO RUGGIANO

RESCUE CO. NO. ENG. 1

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 326 N. P. File # 1216

Date: 5/27/73
MONTH DAY YEAR

Time alarm received 8:13 P M Number of miles traveled 1

Time back in service 8:19 P M

Time back at station 8:25 P M

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

Location of alarm: (Street and Number) BICENTINNAL WAY

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. Ladder(s) #1/ 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	CAPT. C. SALISBURY	
LT. DI GIULIO	LT. R. PAQUET	
C. ZAHN	J. MOLLO	
R. SALISBURY	E. PELLAND	
D. BAZZLE	F. BURSIE	
VEHICLE	**STATION**	**ON SCENE**
	F. ROTELLA	
	W. DRAPER	
	A. IAMMA	

REMARKS: INVESTAGATON, CODE BLUE.

Bernard W. Gruhs
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 327 N. P. File # 1220

Date: 5/28/73
MONTH DAY YEAR

Time alarm received 7:01 P M Number of miles traveled 2

Time back in service 7:16 P M

Time back at station 7:19 P M

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

Location of alarm: (Street and Number) MINERAL SPRING & BROOKSIDE

Cause of fire AUTO ACCIDENT

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 XX
☐ 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)		AUTO 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	
	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) #1,1a. Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. E. DI GIULIO		
C. ZAHN		
G. KENNAWAY		
D. FORTIN		
T. RUSSO		
D. BAZZLE		

VEHICLE	STATION	ON SCENE
E. PELLAND	CAPT. C. SALISBURY	
R. SALISBURY	C. HARRINGTON	
F. BURSIE	F. ROTELLA	
J. BOREK	W. DRAPER	
J. LANE		
R. RATHIER		

REMARKS: NO FIRST AID GIVEN BY ENG.#1. TRANSPORTED BYRES.#1.
ONE FEMALE HIT HEAD ON WINDSHIELD.
1973 FORD GALAXIE --R.I. NM78---
LOUIE MARCELLA 27 STELLA DR. NO. PROV. R.I.

1964 VOLKSWAGON--- R.I. MP74
WAYNE PEARSON, POLE#6, ROUTE44, HARMONY, R.I.

Bernard Di Giulio
SIGNED BY:

LT. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 328 N. P. File # 1228

Date: 5/29/73
MONTH DAY YEAR

Time alarm received 7:49 P M Number of miles traveled 1

Time back in service 7:55 P M

Time back at station 8:00 M

Alarm received by: Box # 125 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) SHERWOOD & BERWICK

Cause of fire SET

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
XX 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
2	Pump Cans		3 Inch Hose	SALVAGE COVERS	
1	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) #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	CAPT. C. SALISBURY	
LT. E. DI GIULIO	T. RUSSO	
E. PELLAND	T. PERNA	
D. FORTIN	K. MIDDLETON	
D. MARCHANO	J. BOREK	
	D. BAZZLE	
	R. RATHIER	

VEHICLE	STATION	ON SCENE
	F. ROTELLA	
	W. DRAPER	

REMARKS: SMALL AREA OF BRUSH AND ONE PINE TREE.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 329 N. P. File # 1229

Date: 5/29/73
MONTH DAY YEAR

Time alarm received 8:05 P M Number of miles traveled 5

Time back in service 8:18 P M

Time back at station 8:27 P M

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

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

Cause of fire _____

Description of building or occupancy: TOWN DUMP

Owner of building or occupancy: TOWN OF NORTH PROVIDENCE

Owner's address: 2008 SMITH ST.

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
XX 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		
LT. E. DI GIULIO		
E. PELLAND		
D. FORTIN		
T. RUSSO		
D. MARCIANO		
J. BOREK		
D. BAZZLE		
R. RATHIER		
VEHICLE	**STATION**	**ON SCENE**
C. ZAHN	CAPT. C. SALISBURY	
J. LANE	T. PERNA	
	K. MIDDLETON	
	F. ROTELLA	
	W. DRAPER	

REMARKS: NO DANGER TO WOOD AREA, DIST. TOLD HQD. TO CALL D.P.W.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 330 N. P. File # 1239

Date: 5/31/73
MONTH DAY YEAR

Time alarm received 7:08 P M
Time back in service 7:13 P M
Time back at station 7:17 P M

Number of miles traveled 2

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

Location of alarm: (Street and Number) 17 JUSTICE 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) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E.DI GIULIO	J. MOLLO	
E. PELLAND	J. BOREK	
D. FORTIN	D. BAZZLE	
F. BURSIE	P. RUGGIANO	
J. LANE		
VEHICLE	**STATION**	**ON SCENE**
CAPT. C. SALISBURY	CAPT. J. MURPHY	
	F. ROTELLA	

REMARKS: CODE BLUE FROM ENG.#2.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.