

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 511 N. P. File # 2139
 Date: 10/1/73

MONTH DAY YEAR

Time alarm received 8:40 P M Number of miles traveled 4
 Time back in service 8:47 P M
 Time back at station 8:51 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)
 Location of alarm: (Street and Number) 17 ROSEDALE ST.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

1

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 #
CAPT. J. MURPHY	CAPT. C. SALISBURY	
W. ROY	LT. E. DI GIULIO	
T. PERNA	LT. R. PAQUET	
	E. PELLAND	
	C. ZAHN	
	T. RUSSO	
	F. BURSIE	
	K. MIDDLETON	
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	D. HOUBE	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE. FROM ENG.#6.

Bernard W. Giulio
 SIGNED BY: _____

CAPT. J. MURPHY
 PERSON IN CHG. _____

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 512 N. P. File # 2140

Date: 10/1/73
MONTH DAY YEAR

Time alarm received 9:11 P M Number of miles traveled 3

Time back in service 9:16 P M

Time back at station 9:20 P M

Alarm received by: Box # 523 Phone _____ Other _____ (Describe)

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

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. 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	
W. ROY	D. FORTIN	
C. ZAHN	T. PER NA	
T. RUSSO	F. BURSIE	
	K. MIDDLETON	
	R. RATHIER	
VEHICLE	STATION	ON SCENE
J. LANE	CHIEF E. DI GIULIO	
D. HOUDE	LT. E. DI GIULIO	
	LT. R. PAQUET	
	B. DI GIULIO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE FROM ENG.#6.

Bernard Di Giulio
 SIGNED BY:

CAPT. J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 513 N. P. File # 2141

Date: 10/2/73
MONTH DAY YEAR

Time alarm received 4:55 A M Number of miles traveled 2

Time back in service _____ M

Time back at station 5:15 A M

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

Location of alarm: (Street and Number) 6 POLLY DR.

Cause of fire STOVE

Description of building or occupancy: _____

Owner of building or occupancy: GEORGE BARONE

Owner's address: SAME

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: #1, 2. #1. #2.

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	LT. R. PAQUET	
CAPT. J. MURPHY	J. MOLLO	
CAPT. C. SALISBURY	E. PELLAND	
LT. E. DI GIULIO	D. FORTIN	
W. ROY	R. PARENTEAU	
C. ZAHN	F. BURSIE	
G. KENNAWAY	J. LANE	
K. MIDDLETON	D. BAZZLE	
	F. ROTELLA	
VEHICLE	STATION	ON SCENE

REMARKS: GAS STOVE OVEN. ~~RECENT~~ OCCUPANT EXTINGUESHED FIRE
WITH A BOX OF BAKING SODA. LIGHT SMOKE IN HOUSE.


 SIGNED BY
 CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 514 N. P. File # 2151

Date: 10 3 73
MONTH DAY YEAR

Time alarm received 3:26 A M Number of miles traveled 2

Time back in service 4:20 A M

Time back at station 4:57 A M

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

Location of alarm: (Street and Number) WOONASQUCKET AVE (LYMANSVILLE MILL)

Cause of fire UNDER INVESTIGATION

Description of building or occupancy: BRICK BLDG. (OCCUPIED BY R.I. OPTICAL

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, 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 C. SALIBURY	CAPT J. MURPHY	
W. ROY	J. MOLLO	
C. ZAHN	LT R. PAQUET	
F. BURSIE	T. PERNA	
K. MIDDLETON	R. PARENTEAU	
T. RUSSO		
VEHICLE	STATION	ON SCENE
D. BAZZLE		

REMARKS: FIRE IN R. I. OPTICAL CONTAINED BY SPRINKLERS
 SMALL FIRE. LOTS OF WATER 1st & 2nd FLOOR.

St. Elizabeth's
 SIGNED BY:

CAPT J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 515 N. P. File # 2152

Date: 10 3 73
MONTH DAY YEAR

Time alarm received 8:30 A M Number of miles traveled 4

Time back in service 10:03 A M

Time back at station 10:10 A M

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

Location of alarm: (Street and Number) SPRINGVILLA APTS (MC GURIE 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	☒ XX 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	<u>17'</u>	2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	SUMP PUMP				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 Ladder(s) _____ Rescue(s) SS RES 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		
D. BAZZLE		
P. PHILLIPS		
VEHICLE	STATION	ON SCENE
	CAPT J. MURPHY	
	W. ROY	
	B. DI GIULIO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: HOLE OUTSIDE OF BLDG. WITH 4' OF WATER GOT INSIDE OF BLDG.
CAUSED BY A HOLE IN WALL. TWO APTS HAD ABOUT 3" OF WATER PLUS
HALLWAY. CALLED RES 2 ON A SPECIAL SIGNAL

St. Ema Di Giulio
 SIGNED BY:

JOHN MOLLO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 2164 N. P. File # 516

Date: 10 4 73
MONTH DAY YEAR

Time alarm received 7:07 P M Number of miles traveled 6

Time back in service 8:45 P M

Time back at station 7:50 P M

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

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

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	☒ 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	
5 Pump Cans	3 Inch Hose	SALVAGE COVERS	
Brooms	Other (Describe)	Number Used	
Other (Describe)		Other Equipment	
2 HAND LIGHTS			

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E. DI GIULIO		
C. ZAHN		
D. FORTIN		
R. RATHIER		
D. HOUDE		
T. PERNA		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CA*PT C. SALISBURY	
	F. BURSIE	
	K. MIDDLETON	
	J. BOREK	
	J. LANE	
	P. RUGGIANO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: FIVE DIFFERENT AREAS BURNING, LEFT FROM MEN BURNING & CUTTING THROUGH FOR ROAD THEY HAD A PERMIT BUT WERE NOT TO LEAVE IT BURNING. NOTIFIED CHIEF OF DEPT. & POLICE


SIGNED BY:

LIEUT. E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 2166 N. P. File # 517

Date: 10 MONTH 5 DAY 73 YEAR

Time alarm received 12:12 A M Number of miles traveled 2

Time back in service 12:18 A M

Time back at station 12:22 A M

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

Location of alarm: (Street and Number) WARREN 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)		
	Other (Describe)				Number Used
					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 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	
LT E. DI GIULIO	J. MOLLO	
W. ROY	D. FORTIN	
F. BURSIE	R. RATHIER	
K. MIDDLETON	D. HOUDÉ	
J. LANE		
D. BAZZLE		
VEHICLE	STATION	ON SCENE
N. PHELAN	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 # 518 N. P. File # 2169

Date: 10 5 73
MONTH DAY YEAR

Time alarm received 7:15 P M Number of miles traveled 4

Time back in service 7:19 P M

Time back at station 7:23 P M

Alarm received by: Box # 517 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) ZAMBARANO AVE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

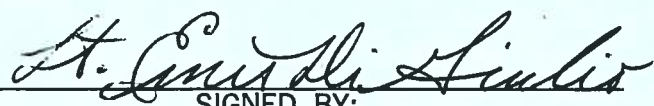
Engines(s) 1, 6 Ladder(s) 1 Rescue(s) 1 & 2 Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT C. SALISBURY	CHIEF E. DI GIULIO	
W. ROY	D. BAZZLE	
E. PELLAND	R. RATHIER	
D. FORTIN	D. HOUDE	
F. BURSIE	T. PERNA	
T. RUSSO		
VEHICLE	STATION	ON SCENE
	J. MOLLO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: **CODE BLUE**


 SIGNED BY:

CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTERDDALE Company Alarm # 519 N. P. File # 2177

Date: 10 6 73
MONTH DAY YEAR

Time alarm received 4:19 P M Number of miles traveled 3

Time back in service 4:53 P M

Time back at station 5:00 P M

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

Location of alarm: (Street and Number) 15 OAK GROVE BLVD.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

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 #
	CHIEF E. DI GIULIO	
	W. ROY	
	E. PELLAND	
	C. ZAHN	
	G. KENNAWAY	
	D. FORTIN	
	R. RATHIER	
	D. HOUDE	
VEHICLE	STATION	ON SCENE
CAPT C. SALISBURY	LT R. PAQUET	
	F. BURSIE	
	T. RUSSO	
	T. PERNA	
	D. MARCIANO	
	W. DRAPER	

REMARKS: CODE BLUE

E. Pelland
SIGNED BY:

E. PELLAND

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 520 N. P. File # 2180
 Date: 10/7/73
MONTH DAY YEAR

Time alarm received 7:57 P M Number of miles traveled 3
 Time back in service 7:59 P M
 Time back at station 8:06 P M

Alarm received by: Box # 512 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) WOONASQUETUCKET AVE. & OAK ST.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

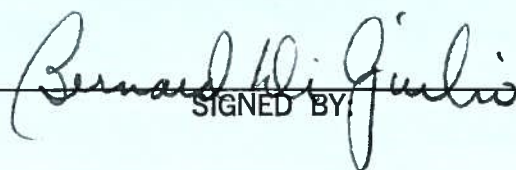
Engines(s) #6,1. Ladder(s) #1. Rescue(s) #1,2. Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. C. SALISBURY	
CAPT. J. MURPHY	LT. R. PAQUET	
G. KENNAWAY	F. BURSIE	
T. RUSSO	R. IAFRATE	
K. MIDDLETON	D. HOUDE	
J. BOREK		
D. BAZZLE		
VEHICLE	STATION	ON SCENE

REMARKS: CODE BLUE FROM ENG.#6.


 SIGNED BY: _____
 CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 521 N. P. File # 2182

Date: 10/8/73
MONTH DAY YEAR

Time alarm received 3:40 P M Number of miles traveled 2

Time back in service 3:43 P M

Time back at station 3:45 P M

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

Location of alarm: (Street and Number) NELSON 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		Oyer 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: _____

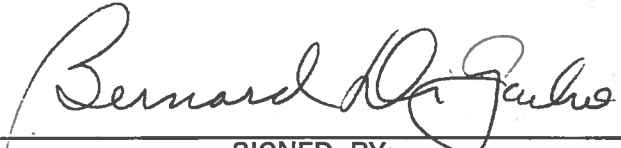
Engines(s) #1, 2, 6. Ladder(s) #1. Rescue(s) #1, 2. Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. C. SALISBURY	
D. FORTIN	LT. R. PAQUET	
T. PERNA	J. MOLLO	
J. BOREK	G. KENNAWAY	
D. BAZZLE	F. BURSIE	
	R. RATHIER	
	D. HOUDE	
	P. RUGGIANO	
VEHICLE	STATION	ON SCENE
	B. DI GIULIO	
	R. IAFRATE	
	W. DRAPER	

REMARKS: CODE BLUE FROM ENG.#1.


 SIGNED BY:
 CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 522 N. P. File # 2187

Date: 10/8/73
MONTH DAY YEAR

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

Time back in service _____ M

Time back at station 9:04 P M

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	☒ 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)		
	Other (Describe)				Number Used
					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	T. PERNA	
E. PELLAND	F. HURSIE	
C. ZAHN	D. BAZZLE	
T. RUSSO	R. RATHIER	
J. BOREK	D. HOUDE	
VEHICLE	STATION	ON SCENE
	CAPT. J. MURPHY	
	R. PARENTEAU	

REMARKS: CODE BLUE FROM ENG. #6.

Bernard Di Giulio
SIGNED BY

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 523 N. P. File # 2188

Date: 10/8/73
MONTH DAY YEAR

Time alarm received 11:42 P M Number of miles traveled 3

Time back in service _____ M

Time back at station 11:49 P M

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

Location of alarm: (Street and Number) 9 NM WASIOTA 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) #2,1. 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	LT. R. PAQUET	
LT. E. DI GIULIO	F. BURSIE	
C. ZAHN	K. MIDDLETON	
D. FORTIN	R. IAFRATE	
T. PERNA	R. RATHIER	
J. LANE	S. COPPA	
D. BAZZLE	D. HOUDE	
VEHICLE	STATION	ON SCENE
	XXXXXXXXXXXXXXXXXXXX	
	W. ROY	
	D. MARCIANO	

REMARKS: CODE BLUE, CALLED FOR HOUSE FIRE, NO SUCH NUMBER.


 SIGNED BY: _____

CAPT. J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 524 N. P. File # 2189

Date: 10/9/73
MONTH DAY YEAR

Time alarm received 8:43 AM M Number of miles traveled 6
 Time back in service 8:50 A M
 Time back at station 9:08 A M

Alarm received by: Box # 6341 Phone _____ Other _____ (Describe)

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

Cause of fire _____

Description of building or occupancy: MAIREVILLE 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	☐ 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) #5,3,4,1. Ladder(s) #2,1. Rescue(s) #3. Car: #1.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
J. MOLLO	LT. E. DI GIULIO	
B. DI GIULIO	D. BAZZLE	
P. PHILLIPS	W. DRAPER	
VEHICLE	STATION	ON SCENE
	CAPT. J. MURPHY	
	D. FORTIN	

REMARKS: CODE BLUE, FROM ENG.#5.

Bernard Di Giulio
SIGNED BY:

B. D. GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 525 N. P. File # 2194

Date: 10 9 73
MONTH DAY YEAR

Time alarm received 4:57 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 5:10 P M

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

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

Cause of fire LIGHT FIXTURE (ELECTRICAL)

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 ☐ Fire in dwelling ☐ Fire in brush or grass ☐ Fire in rubbish ☐ Fire in dump ☐ Fire in vehicle ☐ Miscellaneous fires (describe) _____	☐ Code Red ☒ Code Yellow ☐ Code Blue	☐ Rescue or emergency ☐ Water emergency ☐ Lockout ☐ Accidental alarms ☐ False alarm ☐ Miscellaneous alarm (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)		
	Other (Describe)				Number Used
	DEODORIZER				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	
W. ROY	LT R. PAQUET	
F. BURSIE	E. PELLAND	
K. MIDDLETON	D. BAZZLE	
J. BOREK		
J. LANE		
VEHICLE	STATION	ON SCENE
W. DRAPER	F. ROTELLA	
	D. FORTIN	
	D. HOUDE	

REMARKS: LIGHT FIXTURE SHORTED OUT



SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 526 N. P. File # 2197

Date: 10 9 73
MONTH DAY YEAR

Time alarm received 10:06 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 10:09 P M

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

Location of alarm: (Street and Number) ELMORE & 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	☒ 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 & 2 Car: 78

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
C. ZAHN	CAPT J. MURPHY	
G. KENNAWAY	E. PELLAND	
D. FORTIN	F. BURSIE	
K. MIDDLETON	D. MARCIANO	
J. BOREK	D. BAZZLE	
J. LANE	R. RATHIER	
D. HOUDE	T. PERNA	
T. RUSSO		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	F. ROTELLA	

REMARKS: CODE BLUE


SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 527 N. P. File # 2200

Date: 10/10/73
MONTH DAY YEAR

Time alarm received 11:24 A M Number of miles traveled 14
 Time back in service 12:50 A M
 Time back at station 12:56 A M

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

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

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	☒ 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	<u>400'</u> <u>Booster 1"</u>		<u>Aerial</u>
Dry Chemical			<u>Over 35 Feet</u>
Foam			<u>Under 35 Feet</u>
<u>2</u> Pump Cans			SALVAGE COVERS
Brooms			Number Used
Other (Describe)			Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 30

Defects on apparatus after alarm (if any): _____

Companies responding: #1.

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY		
J. MOLLO		
P. PHILLIPS		
VEHICLE	STATION	ON SCENE
G. KENNAWAY	LT. E. DI GIULIO	
	D. BAZZLE	

REMARKS: MEN CUTTING THROUGH FOR ROAD, WERE TOLD BY CHIEF OF DEPT.
 NO BURNING. PERMIT HAD BENN REVOKED. 5 DIFFERENT FILES.


 SIGNED BY:
 CAPT. J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 528 N. P. File # 2201

Date: 10/10/73
MONTH DAY YEAR

Time alarm received 2:10 P1 M Number of miles traveled 1

Time back in service 2:20 P M

Time back at station 2:24 P M

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

Location of alarm: (Street and Number) 2193 MINERAL SPRING AVE.

Cause of fire LEAKING FITTING ON BOILER

Description of building or occupancy: GIFT SHOP

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) <u>BOILER</u>		_____

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: #1, 2, 6. #1. #2. #1.

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MOLLO	LT. E. DI GIULIO	
J. MOLLO	D. BAZZLE	
G. KENNAWAY		
P. PHILLIPS		
VEHICLE	STATION	ON SCENE
	F. ROTELLA	
	W. DRAPER	

REMARKS: PACKING AROUND STEAM PIPE ALL SHOT. FILLED CELLAR WITH
 STEAM. SHUT OFF BOILER. INSTRUCTED OCCUPANT TO CONTACT LANDLORD AND
 OIL CO. TO SERVICE SAME.


 SIGNED BY:
 CAPT. J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 529 N. P. File # 2202
 Date: 10/10/73
MONTH DAY YEAR

Time alarm received 2:55 P M Number of miles traveled 1
 Time back in service 3:07 P M
 Time back at station 3:10 P M

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

Location of alarm: (Street and Number) 1907 smith ST.

Cause of fire 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)		<u>ACCIDENT</u>

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)		
	Other (Describe)				Number Used
					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 #
J. MOLLO		
D. FORTIN		
P. PHILLIPS		
D. BAZZLE		
VEHICLE	STATION	ON SCENE
W. DRAPER	CAPT. J. MURPHY	
	LT. E. DI GIULIO	

REMARKS: CHILD HIT BY CAR. (CHARLES SPARDELLO, 8YEARS OLD)
 TAKEN TO HOSP. BY PERSON WHO HIT HIM. WAS GONE BEFORE ENG. #1. GOT THERE.
 CAR REG. CF798.

Bernard Di Giulio
 SIGNED BY:

P. PHILLIPS
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 530 N. P. File # 2206

Date: 10/11/73
MONTH DAY YEAR

Time alarm received 8:15 P M Number of miles traveled 3
 Time back in service 8:21 18 P M
 Time back at station 8:23 P M

Alarm received by: Box # 517 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) ZAMBARANO 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) #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 #
D. FORTIN	CAPT. C. SALISBURY	
T. russo	C. ZAHN	
f. bursie	B. DI GIULIO	
	R. PARENTEAU	
	K. MIDDLETON	
	J. BOREK	
	D. BAZZLE	
	R. RATHIER	
	D. HOUDE	
VEHICLE	STATION	ON SCENE
	J. MOLLO	
	E. PELLAND D. MARCIANO	
	D. MARCIANO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE FROM ENG. 6.

Bernard Di Giulio
 SIGNED BY:

F. BURSIE
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 516 N. P. File # 2207

Date: 10/11/73
MONTH DAY YEAR

Time alarm received 8:29 P M Number of miles traveled 3

Time back in service 8:31 P M

Time back at station 8:40 P M

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	☒ 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 #
CAPT. C. SALISBURY	J. MOLLO	
E. PELLAND	R. PARENTREAU	
G. ZAHN	F. BURSIE	
D. FORTIN	D. MARCIANO	
T. RUSSO	D. BAZZLE	
K. MIDDLETON	R. RATHIER	
J. BOREK	D. HOUDE	
VEHICLE	STATION	ON SCENE
	B. DI GIULIO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE FROM ENG. 6. ON RETURN TO STATON ENG. #1 WAS
STONED ON BY PASS. FROM TOP OF HILL NEER THEATER.

Bernard Di Giulio
 SIGNED BY:

CAPT. C. SALISBURY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 532 N. P. File # 2212

Date: 10/12/73
MONTH DAY YEAR

Time alarm received 9:45 P M Number of miles traveled 3

Time back in service 9:53 P M

Time back at station 10:00 P M

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

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

Cause of fire SET

Description of building or occupancy: _____

Owner of building or occupancy: DR. RICCI

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	<u>50'</u> Booster <u>1"</u>	Aerial
Dry Chemical	1½ Inch Hose	Over 35 Feet
Foam	2½ Inch Hose	Under 35 Feet
Pump Cans	3 Inch Hose	SALVAGE COVERS
<u>1</u> Brooms	Other (Describe)	Number Used
Other (Describe)		Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 10

Defects on apparatus after alarm (if any): _____

Companies responding: _____

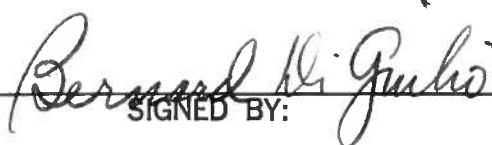
Engines(s) #1. Ladder(s) _____ Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
W. ROY		
E. PELLAND		
C. ZAHN		
T. RUSSO		
VEHICLE	STATION	ON SCENE
P. RUGGIANO	CAPT. J. MURPHY	
	LT. R. PAQUET	
	T. PERNA	
	J. BOREK	
	D. BAZZLE	
	F. ROTELLA	

REMARKS: VACANT LOT, LEAVES BURNING.


SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 533 N. P. File # 2214

Date: 10/13/73
MONTH DAY YEAR

Time alarm received 12:41 A M Number of miles traveled 2

Time back in service _____ M

Time back at station 12:43 A. M

Alarm received by: Box # 422 Phone _____ Other _____ (Describe)

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

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 #
ENGINE #1	CAPT. J. MURPHY	
G. KENNAWAY	W. ROY	
D. PORTIN	E. PELLAND	
F. BURSIE		
J. BOREK		
D. BAZZLE		
P. RUGGIANO		
VEHICLE	STATION	ON SCENE
	P. ROTELLA	

REMARKS: CODE BLUE FROM ENG.#2.

Bernard J. Murphy SIGNED BY *Julio*

CAPT. J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 534 N. P. File # 2215
 Date: 10/13/73
MONTH DAY YEAR

Time alarm received 12:42 A M Number of miles traveled 2
 Time back in service _____ M
 Time back at station 12:44 A. M

Alarm received by: Box # 213 Phone _____ Other _____ (Describe)
 Location of alarm: (Street and Number) LONGVIEW & CHESTNUT
 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) #3,4,5,1. Ladder(s) #2 Rescue(s) #3. Car: _____
 Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY	W. ROY	
G. KENNAWAY	E. PELLAND	
D. FORTIN	D. BAZZLE	
F. BURSIE	P. RUGGIANO	
J. BOREK		
VEHICLE	STATION	ON SCENE
	F. ROTELLA	

REMARKS: FILL FOR ENG.#2. CODE BLUE.

Bernard W. Giulio
 SIGNED BY: _____

CAPT. J. MURPHY
 PERSON IN CHG.

Primary Fire District Report

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
E. PELLAND	F. BURSIE	
J. BOREK	R. IAFRATE	
D. HOUDE		
VEHICLE	STATION	ON SCENE
	F. ROTELLA	

REMARKS: CODE BLUE, _____

Bernard Di Giulio
 SIGNED BY: _____

J. BOREK
 PERSON IN CHG. _____

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 537 N. P. File # 2232

Date: 10/14/73
MONTH DAY YEAR

Time alarm received 10:32 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 10:50 P. M

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

Location of alarm: (Street and Number) 2 GROVER ST.

Cause of fire ELECTRICAL

Description of building or occupancy: APTS.

Owner of building or occupancy: DR. FALINO

Owner's address: SAME

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY		
G. KENNAWAY		
T. RUSSO		
J. BOREK		
D. BAZZLE		
D. HOUDE		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	W. ROY	
	T. PERNA	
	R. IAFRATE	
	F. ROTELLA	

REMARKS: CALL TO INVESTIGATE SMOKE IN APT. FOUND BAD EXTENSION CORD.

ADVISED TENANT TO HAVE LAND LORD GET AN ELECTRICIAN TO CHECK
OTHER WIRING.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 536 N. P. File # 2229

Date: 10/14/73
MONTH DAY YEAR

Time alarm received 6:37 P M Number of miles traveled 6

Time back in service 6:56 P M

Time back at station 7:09 P 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: REAR WHITEHALL BLDG.

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	<u>250'</u> Booster <u>1"</u>	Aerial
Dry Chemical		Over 35 Feet
Foam		Under 35 Feet
Pump Cans		SALVAGE COVERS
<u>2</u> Brooms	Other (Describe)	Number Used
Other (Describe)		Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 10

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
W. ROY		
E. PELLAND		
C. ZANN		
T. RUSSO		
F. BURSIE		
J. LANE		
D. BAZZLE		
D. HOUDE		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT. C. SALISBURY	
CAPT. J. MURPHY	T. PERNA	
D. FORTIN	R. PARENTEAU	
	D. MARCIANO	
	J. BOREK	
	R. RATHIER	
	W. DRAPER	
	F. ROTELLA	

REMARKS: GRASS FIRE TO RAER OF WHITHALL BLDG.

Bernard E. Di Giulio
 SIGNED BY:

CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 538 N. P. File # 2239

Date: 10/15/73
MONTH DAY YEAR

Time alarm received 11:04 P M Number of miles traveled 2

Time back in service 11:10 P M

Time back at station 11:15 P M

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

Location of alarm: (Street and Number) JACKSONIA 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. 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 #
W. ROY	CAPT. J. MURPHY	
D. FORTIN	E. PELLAND	
F. BURSIE	T. PERNA	
J. LANE	K. MIDDLETON	
	J. BOREK	
	D. BAZZLE	
	D. HOUDE	
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	G. ZAHN	
	R. RATHIER	

REMARKS: CODE BLUE, CALL FOR HOUSE FIRE, NO NUMBER GIVEN.

SIGNED BY: *Bernard Di Giulio*

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 539 N. P. File # 2240

Date: 10 16 73
MONTH DAY YEAR

Time alarm received 11:31 A M Number of miles traveled 15

Time back in service _____ M

Time back at station 1:25 P M

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

Location of alarm: (Street and Number) WOODHAVEN MANOR

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical	350'	1½ Inch Hose		Over 35 Feet
	Foam	200'	2½ Inch Hose		Under 35 Feet
3	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	PIKE POLE				
1	PORTABLE RADIO				
1	"2½ + 2½ WYE				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 45

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT XXXXMMRENNXXXXX		
LT E. DI GIULIO		
G. KENNAWAY		
D. BAZZLE		
P. PHILLIPS		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
W. DRAPER	CAPT J. MURPHY	
	J. MOLLO	

REMARKS: MEN BURNING PILES OF WOOD FOR NEW ROAD. IT GOT AWAY FROM THEM
 CAUSED BY WIND & GOT INTO WOODS, HAD TO RELOCATE ENG ON WOODLAWN AVE
 IN SMITHFIELD TO GET TO FIRE & USE HYD. NOTIFIED CHIEF OF DEPT.


 SIGNED BY:

LT E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 540 N. P. File # 2243
 Date: 10 16 73
MONTH DAY YEAR
 Time alarm received 7:45 P M Number of miles traveled 2
 Time back in service _____ M
 Time back at station 7:47 P M
 Alarm received by: Box # 152 Phone _____ Other _____ (Describe)
 Location of alarm: (Street and Number) WOON & COLUMBUS
 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: 1 & 6
 Engines(s) 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 #
W.ROY	R.PELLAND	
D.FORTIN	D.HOUDE	
D.BAZZLE	R.PARENTEAU	
T.PERNA		
VEHICLE	STATION	ON SCENE
	R.IAFRATE	
	P.ROTELLA	

REMARKS: CODE BLUE

Dennis Bazzle
SIGNED BY:

W.ROY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 541 N. P. File # 2253

Date: 10 17 73
MONTH DAY YEAR

Time alarm received 9:06 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 9:13 P M

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

Location of alarm: (Street and Number) 40 JACKSONIA DRIVE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. MURPHY		
C.ZAHN		
D.FORTIN		
D.BAZZLE		
R.RATHIER		
T.RUSSO		
VEHICLE	STATION	ON SCENE
	W.ROY	
	E.PELLAND	
	F.BURSIE	
	K.MIDDLETON	
	J.BOREK	
	J.LANE	
	R.PARENTEAU	
	B.DIGUILO	
	F.ROTELLA	
	W.DRAPER	

REMARKS: CHECKED 40 JACKSONIA NO FIRE ALSO CHECKED LENGTH OF
JACKSONIA & FOURTH STREET.

Dennis Bazzle
SIGNED BY:

CAPTAIN MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 542 N. P. File # 2259

Date: 10 18 73
MONTH DAY YEAR

Time alarm received 4:05 P M Number of miles traveled 2

Time back in service 4:11 P M

Time back at station 4:20 P M

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

Location of alarm: (Street and Number) GARIBALDI STREET

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

Other companies responding: _____

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

[illegible]

REMARKS: CALL FOR KITCHEN FIRE CODE BLUE

Dennis Bazzle
SIGNED BY:

LT. DIGULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company Gentredale Company Alarm # 543 N. P. File # 2261

Date: 10 19 73
MONTH DAY YEAR

Time alarm received 6:50 P M Number of miles traveled 3

Time back in service _____ M

Time back at station 7:06 P M

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

Location of alarm: (Street and Number) WOON. 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) 6, 2, 1 Ladder(s) 1 Rescue(s) 2, 1 Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT.SALISBURY	F.BURSIE	
J.MOLLO	D.BAZZLE	
B.ROY		
G.KENNAWAY		
D.MARCIANO		
VEHICLE	STATION	ON SCENE
	CAPT.MURPHY	
	B.DIGUILLIO	
	D.FORTIN	
	F.ROTELLA	
	W.DRAPER	

REMARKS: **CODE BLUE**

Dennis Bazzle
SIGNED BY:

J.MOLLO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 544 N. P. File # 2262

Date: 10 19 73
MONTH DAY YEAR

Time alarm received 4:04 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 4:09 P M

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

Location of alarm: (Street and Number) 58 MANNING ST.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 6 2 1 Ladder(s) 1 Rescue(s) 1 & 1a 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	
D. FORTIN	E. PELLAND	
G. KENNAWAY		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
	D. BAZZLE	
	F. ROTELLA	

REMARKS: CODE BLUE


SIGNED BY:

LT E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 545 N. P. File # 2263

Date: 10 19 73
MONTH DAY YEAR

Time alarm received 4:35 P M Number of miles traveled 2

Time back in service 4:55 P M

Time back at station 5:10 P M

Alarm received by: Box # _____ Phone XX 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
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: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
E. PELLAND		
G. KENNAWAY		
D. FORTIN		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT C. SALISBURY	
	D. MARCIANO	
	D. BAZZLE	
	F. ROTELLA	

REMARKS: FOUR DIFFERENT FIRES IN WOODS


 SIGNED BY:

JOHN MOLLO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 546 N. P. File # 2267
 Date: 10 20 73
MONTH DAY YEAR

Time alarm received 3:29 P M Number of miles traveled 3
 Time back in service _____ M
 Time back at station 3:33 P M

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

Location of alarm: (Street and Number) BALSTON 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: 1, 2, 6 1 2

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	LT E. DI GIULIO	
W. ROY	F. BURSIE	
C. ZAHN	D. BAZZLE	
D. FORTIN		
D. HOUDE		
R. SALISBURY		
VEHICLE	STATION	ON SCENE
G. KENNAWAY	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE


 SIGNED BY:
 CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTERDALE Company Alarm # 547 N. P. File # 2274

Date: 10 21 73
MONTH DAY YEAR

Time alarm received 4:46 P M Number of miles traveled 4

Time back in service 4:49 P M

Time back at station 4:55 P M

Alarm received by: Box # 532 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) FRUIT HILL & METCALFE

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 C. SALISBURY	
	C. ZAHN	
	G. KENNAWAY	
	D. FORTIN	
	D. BAZZLE	
	R. RATHIER	
	S. COPPA	
	T. PERNA	
VEHICLE	STATION	ON SCENE
	J. BOREK	
	D. HOUDE	
	W. DRAPER	

REMARKS:

CODE BLUE

C. Salisbury
SIGNED BY:

CAPT C. SALISBURY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 548 N. P. File # 2275
 Date: 10 21 73
MONTH DAY YEAR

Time alarm received 4:55 P M Number of miles traveled 4
 Time back in service 5:06 P M
 Time back at station 5:10 P M

Alarm received by: Box # _____ Phone _____ Other RADIO (Describe)
 Location of alarm: (Street and Number) WOON. AVE (REAR OF ALLENDALE MILL)
 Cause of fire _____
 Description of building or occupancy: _____
 Owner of building or occupancy: _____
 Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ 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	
2	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	PAIL				

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 #
	CAPT C. SALISBURY	
	C, ZAHN	
	G. KENNAWAY	
	D. FORTIN	
	D. BAZZLE	
	R. RATHIER	
	S. COPPA	
	T. PERNA	
VEHICLE	STATION	ON SCENE
	J. BOREK	
	D. HOUDE	
	W. DRAPER	

REMARKS: ON RETURN FROM BOX 532 RECEIVED CALL FOR BRUSH FIRE

ENG 1 COULD NOT RESPOND(NO DRIVER) CODE YELLOW


SIGNED BY:

CAPT C. SALISBURY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 549 N. P. File # 2280

Date: 10 22 73
MONTH DAY YEAR

Time alarm received 1:43 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 1:55 P M

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

Location of alarm: (Street and Number) WATERMAN AVE. (REAR OF OCTEAU OIL CO.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
D. FORTIN		
C. ZAHN		
P. PHILLIPS		
R. RUGGIANO		
T. PERNA		
VEHICLE	STATION	ON SCENE
	CAPT J. MURPHY	
	LT E. DI GIULIO	
	E. PELLAND	
	G. KENNAWAY	
	B. DI GIULIO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CALL FOR BRUSH FIRE, FOUND NOTHING CODE BLUE

E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 550 N. P. File # 2290
10/24/73

Date: _____
MONTH DAY YEAR

Time alarm received 5:30 P M Number of miles traveled 6

Time back in service _____ M

Time back at station 5:54 P M

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

Location of alarm: (Street and Number) SAVOY ST

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	☒ 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	175'	Booster ^{1"}		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
3	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: 10

Defects on apparatus after alarm (if any): _____

Companies responding: _____

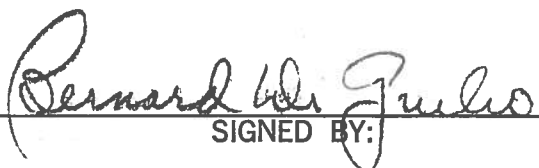
Engines(s) #1. Ladder(s) _____ Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. C. SALISBURY		
W. ROY		
E. PELLAND		
T. RUSSO		
D. BAZZLE		
R. RATHIER		
D. HOUDE		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT. J. MURPHY	
	D. FORTIN	
	T. PERNA	
	F. ROSELLA	
	W. DRAPER	

REMARKS: SMALL AREA ABOUT 100'x100' at end of savoy st.


 SIGNED BY:
 CAPT. C. SALISBURY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 552 N. P. File # 2293

Date: 10/24/73
MONTH DAY YEAR

Time alarm received 6:16 P M Number of miles traveled 2

Time back in service 6:40 P M

Time back at station 6:45 P M

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

Location of alarm: (Street and Number) LARCHMOUNT AVE.
SET

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	
1	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				2	HANDLIGHTS

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 #
CAPT. C. SALISBURY		
W. ROY		
E. PELLAND		
D. FORTIN		
T. PERNA		
D. BAZZLE		
R. RATHIER		
VEHICLE	STATION	ON SCENE
CAPT. J. MURPHY	LT. E. DI GIULIO	
C. ZAHN	H. DARBY	
R. URQUHART	F. ROTELLA	
D. HOUDE	W. DRAPER	

REMARKS: ~~NAME~~ SMALL AREA IN WOODS.


SIGNED BY:

CAPT. C. SALISBURY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 553 N. P. File # 2300

Date: 10 26 73
MONTH DAY YEAR

Time alarm received 10:15 A M Number of miles traveled 1

Time back in service 10:18 A M

Time back at station 10:22 A M

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

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

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	☒ 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) LEAVES		_____

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: 1

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E. DI GIULIO		
B. DI GIULIO		
P. PHILLIPS (RES 1		
VEHICLE	STATION	ON SCENE
A. CACCIA. (RES1)	T PERNA	

REMARKS: TOLD PERSON TO PUT IT OUT. RES1 WAS AT OUR STATION AT
 TIME OF ALARM


 SIGNED BY:

B. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 554 N. P. File # 2303

Date: 10 26 73
MONTH DAY YEAR

Time alarm received 4:30 P M Number of miles traveled 2

Time back in service 4:36 P M

Time back at station 4:44 P M

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

Location of alarm: (Street and Number) ZIPPORAH 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)		
	Other (Describe)				Number Used
					Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: 1 & 6 Ladder(s) 1 Rescue(s) 1 Car: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT C. SALISBURY	W. ROY	
B. DI GIULIO	E. PELLAND	
VEHICLE	STATION	ON SCENE
	F. ROTELLA	

REMARKS: CODE BLUE


 SIGNED BY:

CAPT C. SALISBURY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 555 N. P. File # 2309

Date: 10 27 73
MONTH DAY YEAR

Time alarm received 11:55 A M Number of miles traveled 8

Time back in service 12:10 P M

Time back at station 12:20 P M

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

Location of alarm: (Street and Number) ALLENDALE 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	200'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam	50'	2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		
	Other (Describe)				Number Used
					Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 20

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1, 2, 6 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		
LT E. DI GIULIO		
W. ROY		
D. BAZZLE		
S. COPPA		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	D. FORTIN	
G. KENNAWAY	F. ROTELLA	
D. HOUDE	W. DRAPER	
T. RUSSO		

REMARKS: ENG 6 CALLED FOR TWO SP.SIGNALS FIRE WAS NEAR HOUSES


 SIGNED BY:

CAPT C. SALISBURY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 556 N. P. File # 2310
 Date: 10 27 73
MONTH DAY YEAR

Time alarm received 12:30 P M Number of miles traveled 2
 Time back in service 12:33 P M
 Time back at station 12:40 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)
 Location of alarm: (Street and Number) KING 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: 6, 1, 2 1 1 & 2 1A
 Engines(s) _____ Ladder(s) _____ Rescue(s) _____ Car: _____
 Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT G. SALISBURY	
LT E. DI GIULIO	LT F. BURSIE	
W. ROY	D. MARCIANO	
D. FORTIN	D. BAZZLE	
	D. HOUDE	
VEHICLE	STATION	ON SCENE
	G. KENNAWAY	
	S. CBPPA	
	F. RPTTELLA	
	W. DRAPER	

REMARKS: CODE BLUE

E. Di Giulio
 SIGNED BY:

CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 557 N. P. File # 2311

Date: 10 27 73
MONTH DAY YEAR

Time alarm received 12:50 P M Number of miles traveled 15

Time back in service 1:46 P M

Time back at station 2:01 P M

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

Location of alarm: (Street and Number) WOODHAVEN BLVD.

Cause of fire SET (OPEN BURNING)

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	2008	Booster 2 LINES		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	PIKE POLE				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 45

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		
W. ROY		
G. KENNAWAY		
D. BAZZLE		
H. DARBY		
D. HOUDE		
T. RUSSO		
VEHICLE	STATION	ON SCENE
	CAPT C. SALISBURY	
	D. MARCIANO	
	LT F. BURSIE	
	F. ROTELLA	
	W. DRAPER	

REMARKS: OPEN BURNING WITHOUT A PERMIT BY C&A. OWNER IS
 JOHN ALVES, COMPLAINT FILED BY DIST. CHIEF DI GIULIO WITH PARTROLMAN
 ALBANESE. VIOLATES SEC. 28.1 SEC.F OF TOWN FIRE PREVENTION CODE
 "" "" REG.#4 AIR POLLUTION CONTROL STATE DEPT OF HEALTH


 SIGNED BY:

CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 558 N. P. File # 2314

Date: 10 27 73
MONTH DAY YEAR

Time alarm received 4:24 P M Number of miles traveled 9

Time back in service _____ M

Time back at station 4:55 P M

Alarm received by: Box # _____ Phone XX 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	<u>200'</u>	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
<u>3</u>	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 15

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF EL DI GIULIO		
W. ROY		
E. PELLAND		
G. KENNAWAY		
C. ZAHN		
T. RUSSO		
D. MARCIANO		
D. BAZZLE		
D. HOUDÉ		
VEHICLE	STATION	ON SCENE
	D. FORTIN	
	R. ROTELLA	
	W. DRAPER	
	LT F. BURSIE	
	CAPT C. SALISBURY	

REMARKS: WOODED AREA BEHIND SCHOOL



SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 559 N. P. File # 2315

Date: 10 27 73
MONTH DAY YEAR

Time alarm received 4:55 P M Number of miles traveled 9

Time back in service _____ M

Time back at station 4:59 P M

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

Location of alarm: (Street and Number) SAWIN 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)		
	Other (Describe)				Number Used
					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) 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	
W. ROY	G. KENNAWAY	
E. PELLAND	D. FORTIN	
C. ZAHN		
D. MARCIANO		
D. BAZZLE		
D. HOUDE		
T. RUSSO		
VEHICLE	STATION	ON SCENE
LT F. BURSIE	R. RATHIER	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CALL FOR HOUSE FIRE ENG1 WAS DISPATCHED BY RADIO
FROM SCHOOL


SIGNED BY;

CHIEF DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 560 N. P. File # 2317

Date: 10 27 73
MONTH DAY YEAR

Time alarm received 5:58 M Number of miles traveled 2

Time back in service _____ M

Time back at station 6:14 M

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

Location of alarm: (Street and Number) JACKSONA 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
<u>3</u> Pump Cans	3 Inch Hose	SALVAGE COVERS
<u>1</u> 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 #
LT F. BURSIE		
W. ROY		
E. PELLAND		
C. ZAHN		
D. BAZZLE		
D. HOUDE		
T. RUSSO		
VEHICLE	STATION	ON SCENE
	D. FORTIN	
	R. RATHIER	
	H. DARBY	
	W.DRAPER	

REMARKS: BRUSH BEHIND SCHOOL


SIGNED BY:

LT F. BURSIE
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 561 N. P. File # 2332

Date: 10 28 73
MONTH DAY YEAR

Time alarm received 7:27 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 7:32 M

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

Location of alarm: (Street and Number) 2030 SMITH ST.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☒ Code Blue	☐ 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	<u>25'</u>	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 #
E. PELLAND		
D. BAZZLE		
R. RATHIER		
H. DARBY		
D. HOUDE		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	LT F. BURSIE	
	D. FORTIN	
	J. LANE	
	W. DRAPER	

REMARKS: RUBBISH BARREL


SIGNED BY:

H. DARBY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 562 N. P. File # 2340

Date: 10 30 73
MONTH DAY YEAR

Time alarm received 1:46 A M Number of miles traveled 2

Time back in service 2:02 A M

Time back at station 2:05 A M

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

Location of alarm: (Street and Number) 28 WHIPPLE 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) <u>OIL TANK BURST</u>		

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 #
CAPT J. MURPHY	CAPT C. SALISBURY	
W. ROY	LT F. BURSIE	
C. ZAHN	J. MOLLO	
D. BAZZLE	R. PARENTEAU	
D. HOUDE		
T. PERNA		
VEHICLE	STATION	ON SCENE
	G. KENNAWAY	
	D. FORTIN	

REMARKS: OIL TANK IN CELLAR BURST SPILLING OIL OVER FLOOR


SIGNED BY:

CAPTAIN JOHN MURPHY JR.
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 563 N. P. File # 2349

Date: 10 31 73
MONTH DAY YEAR

Time alarm received 8:33 P M Number of miles traveled 5

Time back in service _____ M

Time back at station 8:40 P M

Alarm received by: Box # 129 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) MIN. SPR. & BROWN

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 Ladder(s) 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	
W. ROY	LT F. BURSIE	
E. PELLAND	D. MARCIANO	
C. ZAHN	D. BAZZLE	
D. FORTIN	R. RATHIER	
T. PERMA	H. DARBY	
K. MIDDLETON	S. COPPA	
J. LANE	T. RUSSO	
P. RUGGIANO		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	LT E. DI GIULIO	
	J. MOLLO	
	D. HOUDE	
	R. PAQUET	
	W. DRAPER	

REMARKS:

CODE BLUE



SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 564 N. P. File # 2350

Date: 10 31 73
MONTH DAY YEAR

Time alarm received 9:11 P M Number of miles traveled 1

Time back in service M

Time back at station 9:18 P M

Alarm received by: Box # 151 Phone Other (Describe)

Location of alarm: (Street and Number) WOON & PEACH 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)		<u> </u>
<u> </u>		<u> </u>

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	
W. ROY	LT F. BURSIE	
E. PELLAND	R. IAFRATE	
C. ZAHN	S. COPPA	
D. FORTIN	D. BAZZLE	
T. RUSSO	R. RATHIER	
K. MIDDLETON		
J. LANE		
H. DARBY		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	LT E. DI GIULIO	
	R. PARENTEAU	
	J. MOLLO	
	J. BOREK	

REMARKS: CODE BLUE


SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 565 N. P. File # 2353

Date: 10 31 73
MONTH DAY YEAR

Time alarm received 9:29 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 9:35 P M

Alarm received by: Box # 1212 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) JACKSONA & BROWN

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1 Ladder(s) 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	
W. ROY	LT F. BURSIE	
E. PELLAND	R. IAFRATE	
C. ZAHN	D. BAZZLE	
D. FORTIN	R. BATHIER	
T. RUSSO	S. COPPA	
K. MIDDLETON	P. PHILLIPS	
J. LANE	T. PERNA	
H. DARBY		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	LT E. DI GIULIO	
	J. MOLLO	
	J. BOREK	
	F. ROTELLA	
	B. PARENTEAU	

REMARKS:

CODE BLUE


SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.