NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 457 N. P. File # 1893

Date: 9 (MONTH) 2 (DAY) 73 (YEAR)

Time alarm received 6:43 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 6:49 P M

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

Location of alarm: (Street and Number) GREYSTON E & WATERMAN 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)		MOTORCYCLE

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
C. ZAHN		
D. FORTIM		
D. BAZZLE		
R. RUGGIANO		
S. COPPA		
T. VERNOE (FH)		
R. PARENTEAU		

VEHICLE	STATION	ON SCENE

REMARKS: THOMAS DI LORENZO 15 MINORU ST. ESMON D RI
MOTOR CYCLE REG. 35303 72 HONDA
LOST CONTROL, TAKEN TO HOSP. B Y RES. 1

Lt. Emilio DiLuzio
SIGNED BY:

PVT. C. ZAHN
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 458 N. P. File # 1894

Date: 9 (MONTH) 2 (DAY) 73 (YEAR)

Time alarm received 9:01 P M Number of miles traveled 4

Time back in service 9 M

Time back at station 9:14 P M

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

Location of alarm: (Street and Number) 1 HOWARD AVE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	150'	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: 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		
J. MOLLO		
K. MIDDLETON		
VEHICLE	**STATION**	**ON SCENE**
LT. E. DI GIULIO		

REMARKS: DUMPSTER FIRE , REAR OF APT. HOUSE

E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 459 N. P. File # 1900

Date: 9 (MONTH) 3 (DAY) 73 (YEAR)

Time alarm received 10:35 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 10:40 P M

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

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

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY	~~LT R. PAQUET~~	
W. ROY	~~J. MOLLO~~	
G. KENNAWAY	~~C. ZAHN~~	
J. B OREK	~~D. FORTIN~~	
T. RUSSO	~~F. BURSIE~~	
T. PERNA	~~D. BAZZLE~~	
	~~R. RATHIER~~	
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO	F. ROTELLA	

REMARKS: CODE BLUE

Lt. Emilio Rotella
SIGNED BY:

CHIEF E. DI GIULI O
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTRAL SQ Company Alarm # 460 N. P. File # 1904

Date: 9 (MONTH) 4 (DAY) 73 (YEAR)

Time alarm received 10:12 A M Number of miles traveled 5

Time back in service ____ M

Time back at station 11:17 A M

Alarm received by: Box # 7433 Phone ____ Other RADIO (Describe)

Location of alarm: (Street and Number) FATIMA HOSP.

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E. DI GIULIO	J. MOLLO	
P. PHILLIPS	C. ZAHN	
B. DI GIULIO		
VEHICLE	**STATION**	**ON SCENE**
CAPT J. MURPHY		
C. HARRINGTON		
E. PELLAND		
W. DRAPER		

REMARKS: CODE YELLOW ENG. 2 (ENG1 WAS TESTING HOSE WITH ENG 6 RECEIVED CALL BY RADIO) LADDER 1 ALSO)

Lt Emilio Di Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 461 N. P. File # 1918

Date: 9/6/73
MONTH DAY YEAR

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

Time back in service ____ M

Time back at station 3:05 P M

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

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

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

	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 #
LT. E. DI GIULIO		
D. FORTIN		
B. DI GIULIO		
J. BOREK		
D. BAZZLE		
W. DRAPER		

VEHICLE	STATION	ON SCENE

REMARKS: CODE BLUE. REPORT OF LIGHTING.

SIGNED BY: Bernard DiGiulio

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 462 N. P. File # 1920

Date: 9/6/73
MONTH DAY YEAR

Time alarm received 2:44 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 3:09 P M

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

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

Cause of fire WATER EMERGENCY

Description of building or occupancy: ADAMS DRUGS

Owner of building or occupancy: ____

Owner's address: ____

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

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

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 #
	W. ROY	
	J. MOLLO	
	K. MIDDLETON	
	D. BAZZLE	
	R. GUERTIN	
	J. LANE	
	G. KENNAWAY	

VEHICLE	STATION	ON SCENE

REMARKS:

Bernard Di Giulio
SIGNED BY:

K. MIDDLETON
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 463 N. P. File # 1923

Date: 9/6/73
MONTH DAY YEAR

Time alarm received 3:10 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 3:35 P M

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

Location of alarm: (Street and Number) HIGHWAY LOUNGE

Cause of fire _____

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)

FIRE CODE

- ☐ Code Red
- ☐ Code Yellow
- ☐ Code Blue

ALARM WITH NO FIRE

- ☐ Rescue or emergency
- XX 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
				2	SQUEEGE
				PORTABLE 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) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
~~LT. E. DI GIULIO~~		
~~D. FORTIN~~		
~~B. DI GIULIO~~		

VEHICLE	STATION	ON SCENE

REMARKS:

SIGNED BY: Bernard Di Giulio

B. ~~DI~~ GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 464 N. P. File # 1928

Date: 9/6/73
MONTH DAY YEAR

Time alarm received 3:35 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 3:41 P M

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

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

Cause of fire WATER IN CELLAR

Description of building or occupancy: REGINE BULLDING

Owner of building or occupancy: SAME

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		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 #
LT. DI GIULIO		
D. FORTIN		
B. DI GIULIO		

VEHICLE	STATION	ON SCENE

REMARKS:

Bernard Di Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 465 N. P. File # 1930

Date: 9/6/73
MONTH DAY YEAR

Time alarm received 3:51 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 4:02 P M

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

Location of alarm: (Street and Number) 23 EAST AVE.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: AL IEMMA

Owner's address: SAME

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☒ Water emergency
☐ Fire in brush or grass	☐ 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 #
LT. E. DI GIULIO		
[illegible] FORTIN		
B. DI GIULIO		
D. DAZZLE		
J. LANE		

VEHICLE	STATION	ON SCENE

REMARKS: 5' OF WATER IN CELLAR& SMELL OF GAS. CALLED FOR GAS CO.
NO WAY OF GETTING TO CELLAR TO PUMP WATER. CALLED FOR PORTABLE PUMPS.

Bernard Di Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 466 N. P. File # 1935

Date: 9 (MONTH) 6 (DAY) 73 (YEAR)

Time alarm received 4:37 P M Number of miles traveled 7

Time back in service ____ M

Time back at station 4:54 P M

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

Location of alarm: (Street and Number) 40 ATLANTIC BLVD. ALSO #2 HATHERLY 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) 1 Ladder(s) ____ Rescue(s) ____ Car: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY		
LT E. DI GIULIO		
D.MARCIANO		
W. ROY		
D.BAZZLE		
B. DI GIULIO		

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	J.MOLLO	
	G. KENNAWAY	
	K. MIDDLETON	
	J. LANE	
	R. GUERTIN	
	C. ZAHN	
	W~~EX~~ W. DRAPER	

REMARKS: CLEANED CATCH BASIN IN ST. ALSO AT #2 HARTHERLY ST.

Lt. Ernest DiGiulio
SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 467 N. P. File # 1936

Date: 9 (MONTH) 6 (DAY) 73 (YEAR)

Time alarm received 4:55 P M Number of miles traveled 7

Time back in service ____ M

Time back at station 5:00 P M

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

Location of alarm: (Street and Number) 19 BROWN 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	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		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 #
CAPT J. MURPHY		
LT E. DI GIULIO		
D.MARCIANO		
W. ROY		
D. BAZZLE		
B. DI GIULIO		

VEHICLE	STATION	ON SCENE
	CHIEF E, DI GIULIO	
	J. MOLLO	
	G. KENNAWAY	
	K. MIDDLETON	
	J. LANE	
	R. GUERTIN	
	C. ZAHN	
	W. DRAPER	
	F. ROTELLA	

REMARKS: NOTNEDDED

Lt. Ernest Di Giulio
SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 468 N. P. File # 1937

Date: 9 (MONTH) 6 (DAY) 73 (YEAR)

Time alarm received 5:05 P M Number of miles traveled 7

Time back in service ____ M

Time back at station 5:09 P M

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

Location of alarm: (Street and Number) 15 BEVERLY ANN DR.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY		
LT E. DI GIULIO		
D. MARCIANO		
W. ROY		
D. BAZZLE		
B. DI GIULIO		

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	G. KENNAWAY	
	K. MIDDLETON	
	J. LANE	
	R. GUERTIN	
	C. ZAHN	
	W. DRAPER	
	F. ROTELLA	

REMARKS: NOT NEEDEED

Lt. Edward Lentz
SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 469 N. P. File # 1938

Date: 9 (MONTH) 6 (DAY) 73 (YEAR)

Time alarm received 5:10 P M Number of miles traveled 7

Time back in service _____ M

Time back at station 5:18 P M

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

Location of alarm: (Street and Number) 11 COVE CT.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	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		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 #
CAPT J. MURPHY		
LT E. DI GIULIO		
D. MARCIANO		
W. ROY		
D. BAZZLE		
B. DI GIULIO		

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIU IO	
	G. KENNAWAY	
	K. MIDDLETON	
	J. LANE	
	R. GUERTIN	
	C. ZAHN	
	W. DRAPER	
	F. ROTELLA	

REMARKS: NOT NEEDED

SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 470 N. P. File # 1941

Date: 9 (MONTH) 6 (DAY) 73 (YEAR)

Time alarm received 5:27 - P M Number of miles traveled 7

Time back in service ____ M

Time back at station 5:39 P M

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

Location of alarm: (Street and Number) 85 STANDISH 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 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. MARCIANO		
W. ROY		
D. BAZZLE		
B. DI GIULIO		
K. MIDDLETON		
J. LANE		

VEHICLE	STATION	ON SCENE
	CAPT J. MURPHY	
	LT E. DI GIULIO	
	G. KENNAWAY	
	R. GUERTIN	
	C. ZAHN	
	W. DRAPER	
	F. ROTELLA	

REMARKS: NOT NEEDED

Lt. E. Di Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company GLENDALE Company Alarm # 471 N. P. File # 1913

Date: 9/6/73 (MONTH / DAY / YEAR)

Time alarm received 5:39 P M

Time back in service ____ M

Time back at station 5:49 P M

Number of miles traveled 2

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

Location of alarm: (Street and Number) 14 PINE 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) 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. MARCIANO		
W. ROY		
D. BAZILE		
B. DI GIULIO		
K. MIDDLETON		

VEHICLE	STATION	ON SCENE
	LT. E. DI GIULIO	
	CAPT. J. MURPHY	
	J. MOLLO	
	G. KENNAWAY	
	R. GUERTIN	
	C. ZAHN	
	W. DRAPER	
	F. ROTELLA	

REMARKS:

Bernard Di Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 472 N. P. File # 1914

Date: 9/6/73 (MONTH / DAY / YEAR)

Time alarm received 5:49 P M Number of miles traveled 3

Time back in service ____ M

Time back at station 6:00 P M

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

Location of alarm: (Street and Number) 121 COTAGE 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) #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. MACLANO		
W. ROY		
D. BAZZLE		
B. DI GIULIO		
K. MIDDLETON		
J. LANE		

VEHICLE	STATION	ON SCENE
	LT. L. DI GIULIO	
	CAPT. J. MURPHY	
	J.MOLLO	
	G. KENNAWAY	
	R. GUERTIN	
	C. ZAHN	
	W. DRAPER	
	F. ROTELLA	

REMARKS:

Bernard Di Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTRAL LL Company Alarm # 473 N. P. File # 1951

Date: 9/5/72
MONTH DAY YEAR

Time alarm received 8:30 P M Number of miles traveled 31

Time back in service ____ M

Time back at station 11:5 P M

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

Location of alarm: (Street and Number) MAY & CHARLES 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	150'	2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				2	HANDLIGHTS

APPARATUS REPORT

Working time of pump: Hours: 3 minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
J. [illegible]		
C. [illegible]		
T. [illegible]		
B. DI GIULIO		
D. MARCINO		
D. [illegible]		
P. [illegible]		

VEHICLE	STATION	ON SCENE
R. [illegible]	CHIEF E. DI GIULIO	
	L. [illegible]	
	[illegible]	
	D. FORTIN	
	F. [illegible]	
	K. [illegible]	

REMARKS: PUMP WATER FROM CELLER.

Bernard Di Giulio

SIGNED BY:

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTRALE Company Alarm # 474 N. P. File # 1965

Date: 9/7/73
MONTH DAY YEAR

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

Time back in service ____ M

Time back at station 9:10 A M

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

Location of alarm: (Street and Number) 2 OAK WOOD 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	☒ 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		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
L. S. DI GIULIO		
B. DI GIULIO		
P. PHILLIPS		

VEHICLE	STATION	ON SCENE
	J. HOLLO	
	W. DRAPER	

REMARKS: WATER NOT DEEP ENOUGH FOR PUMP.
CALL RES. #2. FOR VACUM.

Bernard W. Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 475 N. P. File # 1975

Date: 9/7/73
MONTH DAY YEAR

Time alarm received 5:07 P M Number of miles traveled 2

Time back in service 5:10 P M

Time back at station 5:30 P M

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

Location of alarm: (Street and Number) 37 JUSTICE ST.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

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. C. SALISBURY	CHIEF E. DI GIULIO	
LT. R. PAQUET	D. BAZZLE	
G. KENNAWAY	R. RATHIER	
	V. DI OREO (LYMN.)	
VEHICLE	**STATION**	**ON SCENE**
E. PELLAND	D. MARCIANO	
R. IAFRATE	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE YELLOW FROM ENG.#2. KITCHEN FIRE.

REAR SECTION OF LADDER DAMAGED BACKING INTO STATION.

Bernard D. Fusco
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 476 N. P. File # 1984

Date: 9/7/73
MONTH DAY YEAR

Time alarm received 10:39 P M Number of miles traveled 4

Time back in service ____ M

Time back at station 10:52 P M

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

Location of alarm: (Street and Number) 12 Greenfield

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 DiGuilio		
Lt. Paquet		
J. Borek		
J. Lane		
R. Rathier W.Roy		
T. Russo		

VEHICLE	STATION	ON SCENE
	Capt. Murphy	
	F. Bursie	
	D. Houde	
	T. Perna	

REMARKS: Code blue call was for brush fire, Eng. 2 on another call

SIGNED BY:

Chief DiGaulio

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 477 N. P. File # 1986

Date: 9//73
MONTH DAY YEAR

Time alarm received 12:57 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 1:01 P M

Alarm received by: Box # 442 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) WASHAKI & TOWONDA DR.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

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 #

VEHICLE	STATION	ON SCENE
	chief e. di giulio	
	CAPT. J. MURPHY	
	LT. R. PAQUET	
	W. ROY	
	D. FORTIN	
	T. PERNA	
	F. BURSIE	
	J. LANE	
	F. ROTELLA	

REMARKS: CODE BLUE, DID NOT LEAVE STATION.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTRDAEL Company Alarm # 478 N. P. File # 1988

Date: 9/8/73
MONTH DAY YEAR

Time alarm received 12:45 P M Number of miles traveled 4

Time back in service ____ M

Time back at station 12:52 P M

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

Location of alarm: (Street and Number) 1935 MINERAL SPRING AVE.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT. R. PAQUET	
	C. ZAHN	
	D. FORTIN	
	D. BAZZLE	
	J. LANE	
	P. RUGGIANO	
	J. MAIONE	

VEHICLE	STATION	ON SCENE
W. DRAPER	R. RATHIER	
T. RUSSO	D. HOUDE	
R. PARENTEAU		

REMARKS: CALL FOR LOCKOWT. NOT NEEDED.

Bernard Di Giulio
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 479 N. P. File # 1989

Date: 9/8/73
MONTH DAY YEAR

Time alarm received 3:50 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 3:57 P M

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

Location of alarm: (Street and Number) 54 SAMPSON AVE.

Cause of fire HIBACHI STOVE

Description of building or occupancy: LAWNMOWER

Owner of building or occupancy: MRS. PAUL V. DE FALCO

Owner's address: SAME

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ENG. #1, SPEC. SIG.

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

ENGINE(S) #	LADDER(S) #	RESCUE #
G. KENNAWAY	CHIEF E. DI GIULIO	
D. FORTIN	C. ZAHN	
T. PERNA	T. RUSSO	
S. LaBUTTI (LYMN.)	D. BAZZLE	
J. MAIONE (SMITHFIELD)	R. RATHIER	
W. DRAPER	P. RUGGIANO	

VEHICLE	STATION	ON SCENE
	E. PELLAND	
	R. PARENTEAU	
	D. MARCIANO	
	H. DARBY	
	F. ROTELLA	

REMARKS: CODE YELLOW FOR LADDER#1.
GASOLINE TANK ON LAWNMOWER BURNING, CAUSED FROM CHARCOAL HIBACHI STOVE.
NEXT TO STEEL GARDEN SHED.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 480 N. P. File # 1997

Date: 9/9/73
MONTH DAY YEAR

Time alarm received 5:20 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 5:26 P M

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

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT. R. PAQUET	
	E. PELLAND	
	C. ZAHN	
	T. RUSSO	
	T. PERNA	

VEHICLE	STATION	ON SCENE
CHIEF E, DI GIULIO	CAPT. J. MURPHY	
W. DRAPER	D. BAZZLE	
	F. ROTELLA	

REMARKS: CODE BLUE, CALL FOR DROWNING.

Bernard W. Gulbo
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 481 N. P. File # 1999

Date: 9/9/73
MONTH DAY YEAR

Time alarm received 9:04 P M

Time back in service 9:11 P M

Time back at station 9:20 P M

Number of miles traveled 4

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

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

Cause of fire _____

Description of building or occupancy: LADY OF FATIMA HOSP.

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding:

Engines(s) #1,2,5,6. Ladder(s) #1,2. Rescue(s) #2,3. Car: _____

Other companies responding: PROVIDENCE

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. C. SALISBURY	
E. PELLAN D	CAPT. J. MURPHY	
T. PERNA	T. RUSSO	
D. MARCIANO	F. BURSIE	
D. BAZZLE	J. BOREK	
	R. RATHIER	
	P. RUGGIANO	

VEHICLE	STATION	ON SCENE
C. ZAHN	B. DI GIULIO	
J. LANE	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE YELLOW FROM ENG. #2.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 482 N. P. File # 2001

Date: 9/10/73
MONTH DAY YEAR

Time alarm received 12:18 A M Number of miles traveled 1

Time back in service ____ M

Time back at station 12:23 A M

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

Location of alarm: (Street and Number) ROSEDALE

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #6.2. 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	
	LT. R. PAQUET	
	E. PELLAND	
	C. ZAHN	
	F. BURSIE	
	D. BAZZLE	
VEHICLE	**STATION**	**ON SCENE**
	CHIEF E. DI GIULIO	
	CAPT. J. MURPHY	
	D. FORTIN	
	F. ROTELLA	

REMARKS: CODE BLUE FROM ENG.#6.

Bernard Di Giulio
SIGNED BY:

CAPT. C. SALISBURY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 483 N. P. File # 2006

Date: 9 (MONTH) 10 (DAY) 73 (YEAR)

Time alarm received 8:56 P M Number of miles traveled 4

Time back in service 8:59 P M

Time back at station 9:04 P M

Alarm received by: Box # 515 Phone _____ Other _____ (Describe)

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) ~~1~~ 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 #
	LT E. DI GIULIO	
	C. ZAHN	
	F. BURSIE	
	R. RATHIER	
	T. RUSSO	
VEHICLE	**STATION**	**ON SCENE**
	CHIEF E. DI GIULIO	
	CAPT SALISBURY	
	D. MARCIANO	
	D. BAZZLE	
	P. RUGGIANO	
	R. PARENTEAU	
	F. ROTELLA	

REMARKS: CODE BLUE ENG. 6

Lt. E. Di Giulio
SIGNED BY:

LT E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 484 N. P. File # 2009

Date: 9 (MONTH) 11 (DAY) 73 (YEAR)

Time alarm received 10:50 P M Number of miles traveled 4

Time back in service ____ M

Time back at station 11:35 P M

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

Location of alarm: (Street and Number) END OF GREYSTONE AVE.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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 #
B. DI GIULIO		
G. KENNAWAY		
D. BAZZLE		
P. PHILLIPS		

VEHICLE	STATION	ON SCENE
	CAPT J. MURPHY	
	LT E. DI GIULIO	
	K. MIDDLETON	
	J. LANE	
	W. DRAPER	

REMARKS: CALL FOR SMOKE IN AREA COMPANY HAD A PERMIT TO BURN CLEARING TIMBER

Lt. Emilio Linko
SIGNED BY:

P. PHILLIPS
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 485 N. P. File # 2014

Date: 9 (MONTH) 11 (DAY) 73 (YEAR)

Time alarm received 10:53 P M Number of miles traveled 2

Time back in service 12:12 P M

Time back at station 12:34 P M

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

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

Cause of fire UNKNOWN

Description of building or occupancy: RANCH HOUSE

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	400'	2½ Inch Hose	2— 14'	Under 35 Feet
	Pump Cans		3 Inch Hose	1— 24'	SALVAGE COVERS
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
2	SCOTTS&1 TANK			1hr.	LIGHTS
4	HAND LIGHTS			1hr.	GENERATOR
2	SMOKE EJECTORS & CORD				

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: 78

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY	LT R. PAQUET	
G. KENNAWAY	E. PELLAND	
D. FORTIN	C. ZAHN	
F. BURSIE	D. MARCIANO	
J. BOREK	D. BAZZLE	
D. HOUDE	R. RATHIER	
	J. LANE	
	R. PARENTEAU	

VEHICLE	STATION	ON SCENE
CCHIEF E. DI GIULIO		
LT E. DI GIULIO		
T. RUSSO		
H. DARBY		
F. ROTELLA		

REMARKS: RANCH HOUSE HEAVY FIRE & WATER DAMAGE THRUOUT HOUSE

Lt. Ernest Di Giulio
SIGNED BY:

CAPT MURPHY & CHIEF DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 486 N. P. File # 2018

Date: 9 (MONTH) 12 (DAY) 73 (YEAR)

Time alarm received 6:25 A M Number of miles traveled XXXX 6

Time back in service 6:51 A M

Time back at station 6:56 A M

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

Location of alarm: (Street and Number) SO. LOCUST ST.

Cause of fire RUBBISH

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 (XX)		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe) RUBBISH TRUCK		

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 15

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY		
CAPT C. SALISBURY		
LT E. DI GIULIO		
W. ROY		
D. BAZZLE		
J. BOREK		
F. BURSIE		

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

REMARKS: TRUCK PICKING UP TRASH FOR TOWN, RUBBISH BURNING INSIDE TRUCK

RELIABLE DISPOSAL SERVICE

(MACK TRUCK) REG. 70026 R.I.

JOHN CABRAL 29 GERALD ST. EAST PROV,

Lt. Emilio Giulio
SIGNED BY:

CHIEF ED. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 487 N. P. File # 2019

Date: 9 (MONTH) 12 (DAY) 73 (YEAR)

Time alarm received 2:50 P M

Time back in service 3:12 P M

Time back at station 3:19 P M

Number of miles traveled 4

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

Location of alarm: (Street and Number) 9 WINONA ST (APT#2)

Cause of fire GREASE

Description of building or occupancy: APT. HOUSE

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
2	SMOKE EJECTORS				

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) _____ Car: 1

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CAPT J. MURPHY	
	LT E. DI GIULIO	
	B. DI GIULIO	

VEHICLE	STATION	ON SCENE
J. LANE	D. FORTIN	
W. DRAPER		

REMARKS: GREASE ON STOVE

Lt. Emidio DiGiulio
SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 488 N. P. File # 2020

Date: 9 (MONTH) 12 (DAY) 73 (YEAR)

Time alarm received 7:59 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 8:18 P M

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

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

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

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 C. SALISBURY	LT R. PAQUET	
LT E. DI GIULIO	F. BURSIE	
W. ROY	D. MARCIANO	
E. PELLAND	D. BAZZLE	
C. ZAHN	R. RATHIER	
J. LANE	H. DARBY	
T. RUSSO		
P. RUGGIANO		

VEHICLE	STATION	ON SCENE
CAPT J. MURPHY	D. FORTIN	
R. PARENTEAU	B. DI GIULIO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: 2 SMALL FIRES CAUSED BY MEN CUTTING TREES FOR NEW ROAD

Lt. Emilio Scalzo
SIGNED BY:

CAPT C. SALISBURY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 489 N. P. File # 2021

Date: 9 (MONTH) 12 (DAY) 73 (YEAR)

Time alarm received 8:58 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 9:01 P M

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

Location of alarm: (Street and Number) GREYSTONE SCHOOL

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	LT E. DI GIULIO	
W. ROY	B. DI GIULIO	
E. PELLAND		
C. ZAHN		
H. DARBY		
T. RUSSO		

VEHICLE	STATION	ON SCENE
	D. FORTIN	
	D. BAZZLE	
	R. RATHIER	
	P. PHILLIPS	
	W. DRAPER	

REMARKS: CODE BLUE

Lt. E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 490 N. P. File # 2022

Date: 9 (MONTH) 12 (DAY) 73 (YEAR)

Time alarm received 9:24 P M Number of miles traveled 2

Time back in service 9:28 P M

Time back at station 9:30 P M

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

Location of alarm: (Street and Number) GREYSTONE SCHOOL

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

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		
W. ROY		
E. PELLAND		
C. ZAHN		
H. DARBY		
T. RUSSO		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO		
R. RATHIER	CAPT C. SALISBURY	
	LT E. DI GIULIO	
	D. FORTIN	
	D. BAZZLE	
	P. PHILLIPS	
	T. PERNA	
	B. DI GIULIO	

REMARKS: CODE BLUE

Lt. E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 491 N. P. File # 2023

Date: 9 (MONTH) 12 (DAY) 73 (YEAR)

Time alarm received 11:32 P M Number of miles traveled 3

Time back in service 11:44 P M

Time back at station 11:49 P M

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

Location of alarm: (Street and Number) REAR OF DE BELLIS

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 5

Defects on apparatus after alarm (if any): _____

Companies responding: 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		
LT R. PAQUET		
W. ROT		
E. PELLAND		
C. ZAHN		
D. MARCIANO		
J. LANE		
R. RATHIER		
T. RUSSO		
VEHICLE	**STATION**	**ON SCENE**
D. FORTIN	F. ROTELLA	
R. IAFRATE		

REMARKS: RUBBISH IN DUMPSTER

Lt Emerald Smiles
SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 492 N. P. File # 2024

Date: 9 (MONTH) 13 (DAY) 73 (YEAR)

Time alarm received 3:40 A M Number of miles traveled 3

Time back in service _____ M

Time back at station 3:57 A M

Alarm received by: Box # 413 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) SMITH & FRUIT 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	☒ XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		_____
_____		_____

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT C. SALISBURY	
CAPT J. MURPHY	LT R. PAQUET	
LT E. DI GIULIO	D. MARCIANO	
E. PELLAND	D. BAZZLE	
C. ZAHN		
F. BURSIE		
VEHICLE	**STATION**	**ON SCENE**
	F. ROTELLA	

REMARKS: CODE BLUE FROM ENG2 CENT & FRUIT HILL WERE DISPATCHED TO WRONG BOX. ENG4 WENT TO BOX 414 SMITH & HIGH SERVICE THIS WAS BOX THAT CAME IN.

Lt. E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 493 N. P. File # 2029

Date: 9/13/73 (MONTH / DAY / YEAR)

Time alarm received 3:08 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 3:12 P M

Alarm received by: Box # 524 Phone ____ Other ____ (Describe)

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

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	XX ☐ Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ 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 Car: ____

Other companies responding: ____

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

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

REMARKS: CODE YELLOW FROM ENG. #6.

Bernard Di Giulio
SIGNED BY:

P. PHILLIPS
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTRDALE Company Alarm # 494 N. P. File # 2032

Date: 9/ 13/73
MONTH DAY YEAR

Time alarm received 7:04 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 7:11 P M

Alarm received by: Box # ____ Phone ____ Other REPORTED AT STATON (Describe)

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

Cause of fire BACKFIRED

Description of building or occupancy: ____

Owner of building or occupancy: STATE CESPOOL COMP.

Owner's address: ____

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

	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 #
C. SALISBURY	CAPT. J. MURPHY	
W. R OT	T. RUSSO	
K. MIDDLETON	T. PERNA	
R. RATHIER	D. MARCIANO	
D. BAZZLE	J. BOREK	
	W. DRAPER	
	F. ROETELLA	

VEHICLE	STATION	ON SCENE

REMARKS: OWT ON ARRIVEL. RICHARD FIORE REPORTED FIRE AT STATON#1.

R.I. REG. COMM.

44392 1966 CHEV. TRUCK. OWNER; JOHN SGAMBATO

Bernard A. Giulio

SIGNED BY:

K. MIDDLETON

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 495 N. P. File # 2033

Date: 9/14/73
MONTH DAY YEAR

Time alarm received 1.53 P M Number of miles traveled 4

Time back in service 2:02 P M

Time back at station 2:06 P M

Alarm received by: Box # 6213 Phone _____ Other _____ (Describe)

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #1,3,4,5. Ladder(s) #1,2. Rescue(s) #3. Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. C. SALISBURY	CAPT. J. MURPHY	
W. ROY	LT. R. PAQU ET	
E. PELLAND	F. BURSIE	
C. ZAHN	D. BAZZLE	
T. RUSSO		
C. HARRINGTON		

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	T. PERNA	

REMARKS: CODE BLUE FROM ENG.#3.

Bernard R. Giulio
SIGNED BY:

CAPT. C. SALISBURY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 496 N. P. File # 2026

Date: 9/14/73
MONTH DAY YEAR

Time alarm received 4:07 P M
Time back in service 4:10 P M
Time back at station 4:16 P M

Number of miles traveled 2

Alarm received by: Box # 524 Phone _____ Other _____ (Describe)

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

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	LT. E. DI GIULIO	
B. DI GIULIO	F. PELLAND	
P. PHILLIPS	R. GUERTIN	
J. LANE	D. BAZZLE	
VEHICLE	**STATION**	**ON SCENE**
	W. ROY	
	W. DRAPER	
	F. ROTELLA	

REMARKS: CODE YELLOW FROM ENG. #6.

SIGNED BY: Bernard P. Guerin

P. PHILLIPS

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 497 N. P. File # 2038

Date: 9/14/73
MONTH DAY YEAR

Time alarm received 6:42 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 6:53 P M

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

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

Cause of fire WATER EMERGENCY

Description of building or occupancy: ADAMS DRUGS

Owner of building or occupancy: ____

Owner's address: ____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose	24'	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. R. PAQUET		
W. ROY		
T. RUSSO		
J. BOREK		
H. DARBY		

VEHICLE	STATION	ON SCENE
	E. PELLAND	
	D. FORTIN	
	J. LANE	
	R. RATHIER	
	F. ROTELLA	
	W. BRAPER	

REMARKS: ROOF LEAKING, INSPECTED DRAIN & FOUND IT WASS NOT CLOGGED. ROOF ~~ME~~ HAS TO BE REPAIRED.

Bernard Dr Sanders
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 498 N. P. File # 2041.

Date: 9/14/73
MONTH DAY YEAR

Time alarm received 9:52 P M Number of miles traveled 4

Time back in service ____ M

Time back at station 9:57 P M

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

Location of alarm: (Street and Number) MORGAN AVE,

Cause of fire ____

Description of building or occupancy: GREYSTON SCHOOL

Owner of building or occupancy: TOWN OF NORTH PROVEDENCE

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	XX ☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #1.2.6. Ladder(s) #1,2. Rescue(s) #2. Car: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
C. ZAHN		
E. PELLAND		
D. FORTIN		
D. BAZZLE		

VEHICLE	STATION	ON SCENE
	CAPT. J. MURPHY	
	T. RUSSO	
	T. PERNA	
	R. RATHIER	
	D. HOUDE	
	R. ROTELLA	

REMARKS: CODE BLUE.

Bernard Ma Fuchs
SIGNED BY:

C. ZAHN
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 499 N. P. File # 2051

Date: 9/16/73
MONTH DAY YEAR

Time alarm received 8.12 P M Number of miles traveled 5

Time back in service 8:44 P M

Time back at station 8:50 P M

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

Location of alarm: (Street and Number) BICENNTENNIAL WAY

Cause of fire SET

Description of building or occupancy: CAR FIRE

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
E. PELLAND		
C. ZAHN		
D. FORTIN		
T. RUSSO		
R. RATHIER		
K. DI GIULIO		

VEHICLE	STATION	ON SCENE
R. MARWELL	CAPT. J. MURPHY	
	CAPT. C. SALISBURY	
	LT. R. PAQUET	
	W. ROY	
	T. PERNA	
	F. BURSIE	
	K. MIDDLETON	
	J. BOREK	
	D. BAZZLE	
	P. RUGGIANO	
	J. DRAPER	
	F. ROTELLA	

REMARKS:

ENG.#3, GOT CALLED FOR BRUSH ON SMITHFIELD RD. FIRE WAS ON BICENTENNIAL WAY. TWO CARS BURNING.

1960 CHEV, WAGON (NO PLATES)
1968 PONT. 2DR. CY609 BOTH CARS TOTAL.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 500 N. P. File # 2058

Date: 9/17/73
MONTH DAY YEAR

Time alarm received 10:17 P M Number of miles traveled 3

Time back in service 10:19 P M

Time back at station 10:26 P M

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

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

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

Other companies responding: _____

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

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

REMARKS: CODE BLUE FROM ENG.#6.

Bernard Mc Guire
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 501 N. P. File # 2061

Date: 9 (MONTH) 19 (DAY) 73 (YEAR)

Time alarm received 12:17 A M Number of miles traveled 3

Time back in service ____ M

Time back at station 12:25 A M

Alarm received by: Box # 135 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) SMITHFIELD RD & MARY ANN CT.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) 1, 3 Ladder(s) 2 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		
W. ROY		
E. PELLAND		
D. FORTIN		
F. BURSIE		
D. HOUDE		
R. PARENTEAU		

VEHICLE	STATION	ON SCENE
	J. MOLLO	

REMARKS: CODE BLUE

SIGNED BY:

CAPTAIN J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 502 N. P. File # 2078

Date: 9 (MONTH) 21 (DAY) 73 (YEAR)

Time alarm received 8:30 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 8:34 P M

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

Location of alarm: (Street and Number) MORGAN AVE (GREYSTONE SCHOOL)

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

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 GIU IO		
W. ROY		
E. PELLAND		
D. MARCIANO		
R. RATHIER		
T. RUSSO		

VEHICLE	STATION	ON SCENE
	LT E. DI GIULIO	
	G. KENNAWAY	
	D. FORTIN	
	J. LANE	
	R. IAFRATE	
	D. HOUDE	
	F. ROTELLA	
	W. DRAPER	
	C. ZAHN	

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 # 503 N. P. File # 2083

Date: 9/22/73 (MONTH / DAY / YEAR)

Time alarm received 5:33 P M Number of miles traveled 13

Time back in service ____ M

Time back at station 6:40 P M

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

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

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: TOWN DUMP TOWN OF NORTH PROVIDENCE

Owner's address: ____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam	100'	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: ____

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		
F. BURSIE		
R. RATHIER		
P. RUGGIANO		
D. HOUDE		

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

REMARKS:

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 506 N. P. File # 2087

Date: 9/22/73
MONTH DAY YEAR

Time alarm received 11:37 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 11:45 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	XX Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #6, 2, 1. Ladder(s) #2. 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		
W. ROY		
E. PELLAND		
C. ZAHN		
G. KENNAWAY		
D. FORTIN		
T. PERNA		
J. BOREK		
R. RATHIER		
P. RUGGIANO		
VEHICLE	**STATION**	**ON SCENE**
	T. RUSSO	
	D. BAZZLE	
	D. HOUDE	

REMARKS: CODE BLUE FROM ENG.#6.

Bernard J. Murphy
SIGNED BY:

CAPT. J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 504 N. P. File # 2084

Date: 9/22/73
MONTH DAY YEAR

Time alarm received 8:45 P M Number of miles traveled 4

Time back in service 8:55 P M

Time back at station M

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

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

Cause of fire

Description of building or occupancy: HOSPITAL

Owner of building or occupancy: LADY OF FATIMA HOSP.

Owner's address: SAME

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

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

APPARATUS REPORT

Working time of pump: Hours: minutes:

Defects on apparatus after alarm (if any):

Companies responding:

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

Other companies responding: PROVIDENCE

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
E. PELLAND		
C. ZAHN		
G. KENNAWAY		
T. RUSSO		
R. SALISBURY		
R. RATHIER		
H. DARBY		

VEHICLE	STATION	ON SCENE
D. BAZZLE	CAPT. J. MURPHY	
D. HOUDE	F. ROTELLA	

REMARKS: CODE YELLOW FROM ENG.#?.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 505 N. P. File # 2085

Date: 9/22/73 (MONTH / DAY / YEAR)

Time alarm received 9:38 P M Number of miles traveled 11

Time back in service ____ M

Time back at station 10:15 P M

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

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

Cause of fire ____

Description of building or occupancy: TOWN DUMP

Owner of building or occupancy: TOWN OF NORTH PROVIDENCE

Owner's address: 2008 SMITH ST.

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: #) 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 #
LT. R. PAQUET		
E. PELLAND		
C. ZAHN		
G. KENNAWAY		
T. PERNA		
R. SALISBURY		
D. BAZZLE		
R. RATHIER		
VEHICLE	**STATION**	**ON SCENE**
D. HOUDE	CAPT. J. MURPHY	
	K. MIDDLETON	
	J. BOREK	
	F. ROTELLA	

REMARKS: CODE YELLOW: EMPTIED TANK ON SMOLDING RUBBISH.

DENNIS BAZZLE INJURED RIGHT MIDDLE FINGER. BROUGHT TO ACCIDENT ROOM UPON RETURN TO STATION.

Bernard R. Paquet
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

Fire. Dept.
Co. # 505

NO. PROVIDENCE FIRE DEPARTMENT

– PRIMARY RESCUE REPORTS –

DATE: 9/22/73 TIME: ARRIVED 9:45 P.M. RETURNED 10:15 P.M.

NAME: DENNIS BAZZLE AGE: 18

ADDRESS: 3 ALDRICH ST. ALARM BY:

NORTH PROVIDENCE, R.I.

LOCATION OF RESCUE XXXXXXXXX TOWN DUMP

EXAMINATION

SKULL *

EYES *

EARS *

NOSE *

MOUTH *

CHEST *

ABDOMEN *

UPPER EXTREMITIES *

LOWER EXTREMITIES *RIGHT HAND, MIDDLE FINGER, LACERATION & PUNCTURE.

POSITION OF PATIENT WHEN FOUND: STANDING

WAS PATIENT CONSCIOUS? YES

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN) YES

PATIENT TRANSPORTED TO: ROGER WILLIAMS HOSP. VIA R. RATHIER CAR,

IF PATIENT WAS NOT TRANSPORTED EXPLAIN:

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

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

CLEANED LACERATION & PUNCTURE. BANDAGED SAME.

SIGNED: Bernard A. Giulio OFFICER IN CHARGE: P. RUGGIANO

RESCUE CO. NO. ENG. #1.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 507 N. P. File # 2097

Date: 9/24/73
MONTH DAY YEAR

Time alarm received 12:17 P. M Number of miles traveled 1

Time back in service ____ M

Time back at station 12:27 P M

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

Location of alarm: (Street and Number) 66 ALLEN AVE.

Cause of fire SHORT

Description of building or occupancy: 1 STORY RANCH

Owner of building or occupancy: ANTHONY GALLONIO

Owner's address: SAME

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

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

VEHICLE	STATION	ON SCENE
CAPT. C. SALISBURY	E. PELLAND	
W. ROY		
J. BOREK		

REMARKS: NO FIRE; SHORT IN SWITCH FOR LIGHT ON ELECTRIC STOVE,

Bernard Di Giulio
SIGNED BY:

LT. E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 508 N. P. File # 2104

Date: 9 (MONTH) 25 (DAY) 73 (YEAR)

Time alarm received 1:13 P M Number of miles traveled 2

Time back in service 1:17 P M

Time back at station 1:23 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E. DI GIULIO		
J. MOLLO		
G. KENNAWAY		

VEHICLE	STATION	ON SCENE
CAPT C. SALISBURY	D. BAZZLE	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CAR ACCIDENT NO INJURIES. AFTER LEAVING SCENE PERSON DECIDED TO GO TO HOSP. FOR OBSERVATION RES. 1 TRANSPORTED
REG. R.I. XG 524 OLDS
R.I. MY 380 PLYMOUTH

Lt. Emil Di Giulio
SIGNED BY:

CAPT C. SALISBURY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 509 N. P. File # 2122

Date: 9 (MONTH) 28 (DAY) 73 (YEAR)

Time alarm received 10:31 P M Number of miles traveled 5

Time back in service ____ M

Time back at station 10:57 P M

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

Location of alarm: (Street and Number) TOWN DUMP

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: SMITHFIELD TANKER 2

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT R. PAQUET		
E. PELLAND		
D. FORTIN		
J. BOREK		
R. RATHIER		
T. RUSSO		

VEHICLE	STATION	ON SCENE
	W. ROY	
	F. BURSIE	
	T. PERNA	

REMARKS: CALL FOR DUMP FIRE, WAS IN SMITHFIELD NOTIFIED FIRE ALARM OF SAME

Lt. Emilio Russo
SIGNED BY:

LT R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTERDALE Company Alarm # 510 N. P. File # 2125

Date: 9 (MONTH) 29 (DAY) 73 (YEAR)

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

Time back in service 4:08 P M

Time back at station 4:12 P M

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

Location of alarm: (Street and Number) 50 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	XX Code Yellow	☐ Water emergency
XX Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		_____
_____		_____

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

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: 78

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT R. PAQUET		
D. FORTIN		
P. RUGGIANO		
R. RATHIER		
J. LANE		
T. RUSSO		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	LT E. DI GIULIO	
	R.PARENTEAU	
	T. PERNA	
	F. ROTELLA	
	E. PELLAND	

REMARKS: SMALL PATCH,CODE YELLOW

SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.