NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 34 N. P. File # 75

Date: 2 (MONTH) 1 (DAY) 74 (YEAR)

Time alarm received 1:05 A M Number of miles traveled 2

Time back in service ____ M

Time back at station 1:14 A M

Alarm received by: Box # 152 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) WOON & COLUMBS

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) 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 F. BURSIE	
CAPT C. SALISBURY	J. MOLLO	
W. ROY	B. FORTIN	
E. PELLAND	N. PHELAND	
C. ZAHN		
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO	F. ROTELLA	

REMARKS: CODE BLUE

SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 35 N. P. File # 76

Date: 2 (MONTH) 2 (DAY) 74 (YEAR)

Time alarm received 1:35 A M Number of miles traveled 1

Time back in service _____ M

Time back at station 1:42 A M

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

Location of alarm: (Street and Number) 19 BYRON 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 & 7 Ladder(s) 1 Rescue(s) 1 Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY	CAPT C. SALISBURY	
W. ROY	LT F. BURSIE	
C. ZAHN	D. BAZZLE	
N. PHELAND	J. MOLLO	
T. RUSSO	D. FORTIN	

VEHICLE	STATION	ON SCENE

REMARKS: CALL FOR HOUSE FIRE, TURNED OUT TO BE A GRASS FIRE, OUT ON ARRIVAL

Lt. Charles Hanlis
SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company C ENTREDALE Company Alarm # 36 N. P. File # 80

Date: 2 (MONTH) 2 (DAY) 74 (YEAR)

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

Time back in service 8:56 P M

Time back at station 9:10 M

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

Location of alarm: (Street and Number) 38 OREGON 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 & 6 Ladder(s) 1 Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
W. ROY	LT E. DI GIULIO	
T. PERNA	D. FORTIN	
R. RATHIER		

VEHICLE	STATION	ON SCENE
	F. ROTELLA	

REMARKS: ENG 7 DID NOT LEAVE STATION, SPECIAL SIGNAL FOR ENG 6 CODE BLUE FROM ENG 1, NO SUCH ADDRESS

A. Emilio Giulio
SIGNED BY:

WILLIAM ROY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 37 N. P. File # 82

Date: 2 (MONTH) 3 (DAY) 74 (YEAR)

Time alarm received 3:04 P M Number of miles traveled 1

Time back in service 3:12 P M

Time back at station 3:20 P M

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

Location of alarm: (Street and Number) 12 WIPPLE 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	☒ 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 Ladder(s) 1 Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E. DI GIULIO	D. BAZZLE	
C. ZAHN	J. MOLLO	
T. RUSSO	R. RATHIER	
D. FORTIN	N. PHELAND	
	T. PERNA	

VEHICLE	STATION	ON SCENE
	W. DRAPER	

REMARKS: CODE BLUE, NO SUCH ADDRESS ENG 7 DID NOT GET OUT SPECIAL SIGNAL FOR ENG6

Lt. Emilio Di Giulio
SIGNED BY:

LIEUT E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 38 N. P. File # 85

Date: 2 (MONTH) 5 (DAY) 74 (YEAR)

Time alarm received 9:23 P M Number of miles traveled 6

Time back in service 9:51 P M

Time back at station 10:00 P M

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

Location of alarm: (Street and Number) 28 ~~WOODLAWN~~ BLVD WOODHAVEN

Cause of fire FIRE PLACE

Description of building or occupancy: _____

Owner of building or occupancy: PAUL D RONDEAU

Owner's address: SAME

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose	10' & 14'	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	PRY AXE				
1	SMOKE EJECTOR				
1	HAND LIGHT				
	DEODORIZER				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIU IO	LT F. BURSIE	
E. PELLAND	K. MIDDLETON	
C. ZAHN	D.MARCIANO	
D. BAZZLE	D. FORTIN	
T. RUSSO	P, RUGGIANO	
VEHICLE	**STATION**	**ON SCENE**
H. DARBY	CAPT J. MURPHY	

REMARKS: PANELING BURNT, FIRE PLACE WALL (DEN) WOOD FURRING BEHIND PLASTER WAS INCONTACT WITH STACK PIPE OF POT BELLY STOVE, SLIGHT SMOKE THROUGH OUT HOUSE.

Lt. Eric Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 39 N. P. File # 86

Date: 2 (MONTH) 6 (DAY) 74 (YEAR)

Time alarm received 8:13 A M Number of miles traveled 4

Time back in service 8:33 A M

Time back at station 8:35 A M

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

Location of alarm: (Street and Number) SENIOR CITIZEN HOUSING (SUNSET AVE.)

Cause of fire STOVE

Description of building or occupancy: XXXXX

Owner of building or occupancy: TOWN

Owner's address: _____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
	NONE				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1, 7, 3 Ladder(s) 1 & 2 Rescue(s) 1 & 2 Car: 1

Other companies responding: _____

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

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

VEHICLE	STATION	ON SCENE
CAPT J. MURPHY	W. ROW	
	D. BAZZLE	
	D. FORTIN	
	F. ROTELLA	

REMARKS: FOOD ON COUNTER IN KITCHEN WAS NEAR STOVE, STOVE WAS BEING USED, CAUGHT PAPER WRAPED AROUND FOOD, NO DAMAGE TO KITCHEN OUT ON ARRIVAL , OCCUPANT- PIA ROSSI BLDG. B APT. 22 1st FLOOR

Lt. Emilio Di Giulio
SIGNED BY:

LT E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 40 N. P. File # 87

Date: 2 (MONTH) 6 (DAY) 74 (YEAR)

Time alarm received 3:54 P M

Time back in service 4:48 P M

Time back at station 4:52 P M

Number of miles traveled 2

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	XX Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		XX Miscellaneous alarm (describe) DOG IN WATER
☐ 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	PIKE POLES				
1	AXE & ROPE				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) _____ Ladder(s) 1 Rescue(s) 1, 1a & BOAT Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT E. DI GIULIO	
	B. DI GIULIO	
	K. MIDDLETON	
	D. FORTIN	
	N. PHELAND	

VEHICLE	STATION	ON SCENE
LT F. BURSIE	J. MOLLO	
W. ROY	D. BAZZLE	
	P. PHILLIPS	
	W. DRAPER	

REMARKS: DOG FELL THROUGH ICE, COULDN'T GET OUT ABOUT 300' FROM SHORE

H. Ernest Di Giulio
SIGNED BY:

LIEUT E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 41 N. P. File # 93

Date: 2 (MONTH) 12 (DAY) 74 (YEAR)

Time alarm received 2:26 P M

Time back in service 3:17 P M

Time back at station 3:20 P M

Number of miles traveled 12

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

Location of alarm: (Street and Number) JOSLIN & WALTER ST.

Cause of fire SET

Description of building or occupancy: SHACK (CLUB 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	XX Code Yellow	☐ Water emergency
☐ Fire in brush or grass	☐ Code Blue	☐ Lockout
☐ Fire in rubbish		☐ Accidental alarms
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
XX Miscellaneous fires (describe) SHACK (CLUB HOUSE)		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	250'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam	34'	2½ Inch Hose 2 LINES		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	AXE				

APPARATUS REPORT

Working time of pump: Hours: ½hr 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		
D. BAZZLE		
P. PHILLIPS		

VEHICLE	STATION	ON SCENE
	J. MOLLO	
	W. ROY	
	T. PERNA	
	W. DRAPER	

REMARKS: CLUB HOUSE IN WOODS, FULLY INVOLVED

Lt. Emilio Di Giulio
SIGNED BY:

PVT P. PHILLIPS
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 42 N. P. File # 94

Date: 2 (MONTH) 13 (DAY) 74 (YEAR)

Time alarm received 3:13 P M

Time back in service 3:17 P M

Time back at station 3:25 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	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, 7 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 #
	J. MOLLO	
	W. DRAPER	
VEHICLE	**STATION**	**ON SCENE**
	W. ROY	
	T. PERNA	

REMARKS: CODE BLUE, ENG 1 WAS AT FIRE ON JOSLIN ST.

Lt. Emil A. Giulio
SIGNED BY:

W. DRAPER
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company ENTREDALE Company Alarm # 43 N. P. File # 95

Date: 2 (MONTH) 13 (DAY) 74 (YEAR)

Time alarm received 7:32 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 7:35 P M

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

Location of alarm: (Street and Number) 36 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	☒ 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) 7 & 1 Ladder(s) 1 Rescue(s) 2 Car: ____

Other companies responding: ____

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

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

REMARKS: CODE BLUE

H. Emilio Di Giulio
SIGNED BY:

CHIEF ED. DI GIULIO
PERSON IN CHG.

NO. PROVIDENCE FIRE DEPARTMENT

– PRIMARY RESCUE REPORTS –

RES. FILE # 156 CO. #--44--

DATE: FEB 14 1974 TIME: ARRIVED 12:17 AM RETURNED 12:33 AM

NAME: JACK LANE AGE: 23

ADDRESS: 91 EAST AVE. ALARM BY: CENTREDALE
NORTH PROV, R.I.

LOCATION OF RESCUE ALLEY WAY NEXT TO FIRE STATION (CENTREDALE)

EXAMINATION

SKULL * BUMP ON HEAD

EYES *

EARS *

NOSE *

MOUTH *

CHEST *

ABDOMEN *

UPPER EXTREMITIES * COMPLAINED OF EXTREME PAIN IN BACK

LOWER EXTREMITIES * COULD NOT FEEL ANY SENSATION IN LEGS

POSITION OF PATIENT WHEN FOUND: LYING AT BOTTOM OF OUTSIDE STAIRS

WAS PATIENT CONSCIOUS? YES

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN) YES

PATIENT TRANSPORTED TO: ROGER WILLIAMS HOSP.

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)

USED 2 BLANKETS, ASSISTED RES. 1 IN PREPARATION FOR TRANSPORTATION

MEN WHO WERE HERE
LT. F. BURSIE
W. ROY
R. IAFRATE

SIGNED: H. Grant Hailes OFFICER IN CHARGE: LIEUT, F. BURSIE

RESCUE CO. NO. ———

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 45 N. P. File # 96

Date: 2 (MONTH) 15 (DAY) 74 (YEAR)

Time alarm received 2:27 P M Number of miles traveled 3

Time back in service 2:39 P M

Time back at station 2:45 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	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 #
C. ZAHN		
T. RUSSO		
B. DI GIULIO		
D. FORTIN		

VEHICLE	STATION	ON SCENE
P. RUGGIANO	LT E. DI GIULIO	
	J. MOLLO	
	W. DRAPER	

REMARKS: NOT NEEDED, TWO CAR ACCIDENT

CAR#1 REG. tu 905 R.I. CADILLAC

CAR#2 "" FS 688 R.I. CHEV.

Lt. Emil Di Giulio

SIGNED BY:

B. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 46 N. P. File # 104

Date: 2/21/74
MONTH DAY YEAR

Time alarm received 4:41 P M Number of miles traveled 4

Time back in service ____ M

Time back at station 4:56 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: SMITHFIELD MANOR

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #3.4.5.7. Ladder(s) #2.3. 1 Rescue(s) #2.3. Car: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CAPT. J. MURPHY	
	CAPT. C. SALISBURY	
	E. PELLAND	
	J. BOREK	
	D. MARCIANO	
	N. PHELAND	
	R. SALISBURY	

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	LT. E. DI GIULIO	
	W. ROY	
	T. RUSSO	
	B. DI GIULIO	
	J. MOLLO	
	P. PHILLIPS	
	F. ROTELLA	

REMARKS: NO CODE GIVEN.

Bernard Di Giulio
SIGNED BY:

CAPT. J. MURPHY.
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 47 N. P. File # 105

Date: 2/21/74
MONTH DAY YEAR

Time alarm received 7:24 P M Number of miles traveled 1

Time back in service M

Time back at station 7:27 P M

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

Location of alarm: (Street and Number) SMITH ST

Cause of fire

Description of building or occupancy: SUNNYBROOK FARMS

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) #7.1. Ladder(s) #1. Rescue(s) #2. Car:

Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
J. BOREK	E. PELLAND	
S. COPPA	P. RUGGIANO	
T. PERNA	R. PARENTEAU	
W. DRAPER JR.		
VEHICLE	**STATION**	**ON SCENE**
	D. MARCIANO	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE FROM ENG.#7.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 48 N. P. File # 107

Date: 2/22/74
MONTH DAY YEAR

Time alarm received 4:03 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 4:23 P M

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

Location of alarm: (Street and Number) 10 REDFERN ST.

Cause of fire BROKEN LINE ON REFRIGERATOR

Description of building or occupancy: 1 STORY WOODEN

Owner of building or occupancy: LARRY JARBEAU

Owner's address: ____

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

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	SCOT AIR PAC
				1	SMOKE EJECTOR

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) ____ Ladder(s) 21 ____ Rescue(s) ____ Car: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	E.PELLAND	
	B. DI GIULIO	
	J. MOLLO	
	P. PHILLIPS	

VEHICLE	STATION	ON SCENE
R. SALISBURY	W. ROY	
	F. ROTELLA	
	W. DRAPER	

REMARKS: J. SCORPIO, CONTRACTOR. REMODLING HOUSE, BROKE LINE ON REFRIGERATOR. FUMES LEAKING.

Bernard Di Giulio
SIGNED BY:

J. MOLLO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 49 N. P. File # 109

Date: 2/23/74
MONTH DAY YEAR

Time alarm received 3.20 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 3.44 P M

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

Location of alarm: (Street and Number) 40 BI CENTENNIAL WAY

Cause of fire INVESTIGATION

Description of building or occupancy: ____

Owner of building or occupancy: GEORGE PSTLUPOULOUS

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		XX ☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		INVESTIGATION

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CHIEF E. DI GIULIO	
	T. RUSSO	
	W.A. DRAPER JR.	
	W. DRAPER	

VEHICLE	STATION	ON SCENE

REMARKS: INVESTIGATION.

CHIMNEY SNAPPED OFF AT ROOF LEVEL. POSSIBILITY OF BACK DRAFT OCCURRING. ADVISED ~~EMER~~ OWNER OF SAME.

CAUSED BY HIGH WINDS.

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 50 N. P. File # 115

Date: 2/24/74
MONTH DAY YEAR

Time alarm received 1:14 A M Number of miles traveled 3

Time back in service ____ M

Time back at station 1:32 A M

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

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

Cause of fire AUTO ACCIDENT

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY		
LT. F. BURSIE		
E. PELLAND		
C. ZAHN		
J. MOLLO		
J. LANE		
N. PHELAND		
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO	D. FORTIN	
CAPT. C. SALISBURY		
R. SALISBURY		
W. DRAPER JR.		

REMARKS: ASSISTED RES.#1. 3 PERSONS TRANSPORTED TO ROGER WILLWAMS GEN.
SWEPT UP GLASS IN ROAD.
VEHICLES INVOLVED,
R.I. REG. ØI 428
MASS. REG. 901 -400

Bernard Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 51 N. P. File # 120

Date: 2/25/74
MONTH DAY YEAR

Time alarm received 10:15 A M
Time back in service 10:34 A M
Time back at station 10:40 A M

Number of miles traveled 4

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

Location of alarm: (Street and Number) 10 SHERMAN 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
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	2/14'	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				2	SMOKE EJECTORS
					CORD

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #7, 1. Ladder(s) #1. Rescue(s) #2. Car: #1.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. E. DI GIULIO	C. ZAHN	
T. RUSSO	J. MOLLO	
B. DI GIULIO	D. FORTIN	
P. PHILLIPS		
VEHICLE	**STATION**	**ON SCENE**
F. ROTELLA	N. PHELAND	
	W. DRAPER	

REMARKS: CHIMNEY FOR FIRE PLACE WAS COVERED WITH A CANVICE.
LADERY LIT FIRE PLACE. HOUSE FULL OF SMOKE.

Bernard Di Giulio
SIGNED BY:

LT. E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 52 N. P. File # 123

Date: 2/26/74
MONTH DAY YEAR

Time alarm received 7:24 A M Number of miles traveled 4

Time back in service ____ M

Time back at station 7:29 A M

Alarm received by: Box # 3211 Phone ____ Other ____ (Describe)

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

Cause of fire BLUE

Description of building or occupancy: HARRISON CHEMICAL CO.

Owner of building or occupancy: SAME

Owner's address: SAME

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) 5.4.3.1. Ladder(s) #2.1. Rescue(s) #3. Car: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
lt. B.DI GIULIO	W. ROY	
C. ZAHN	J. MOLLO	
B. DI GIULIO	W. DRAPER	

VEHICLE	STATION	ON SCENE
	CAPT. J. MURPHY	
	T. RUSSO	
	D. FORTIN	
	N. PHELAND	
	P. PHILLIPS	
	F. ROTELLA	

REMARKS: CODE BLUE FROM ENG.#5.

Bernard Di Giulio

SIGNED BY:

LT. ~~ARMED~~ B. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 53 N. P. File # 124

Date: 2 (MONTH) 26 (DAY) 74 (YEAR)

Time alarm received 9:39 P. M

Time back in service 9:44 P M

Time back at station 9:50 P M

Number of miles traveled 3

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

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

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) 7 & 1 Ladder(s) 1 Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	LT F. BURSIE	
D. FORTIN	C. ZAHN	
R. RATHIER	D. BAZZLE	
T. RUSSO	W. DRAPER JR.	
VEHICLE	**STATION**	**ON SCENE**
CAPT J. MURPHY		
F. ROTELLA		
J. LANE		

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 # 54 N. P. File # 129

Date: 2/27/74 (MONTH DAY YEAR)

Time alarm received 6:20 P M Number of miles traveled 3

Time back in service ____ M

Time back at station 6:36 P M

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

Location of alarm: (Street and Number) mr. christmas Parking Lot

Cause of fire LEAKING GAS TANK

Description of building or occupancy: ____

Owner of building or occupancy: ARMAND BOUDEAU

Owner's address: 4 CAMP ST. SMITHFIELD, R.I.

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

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: 10

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. F. BURSIE		
W. ROY		
D. BAZZLE		
T. RUSSO		
W. DRAPER JR.		
P. RUGGIANO		

VEHICLE	STATION	ON SCENE
J. LANE	T. PERNA	
R. PAQUET	D. FORTIN	
	ROTILLA	
	W. DRAPER	

REMARKS: GASOLINE WASHDOWN.

OWNER: ARMAND BOUDEAU
4 CAMP ST.
SMITHFIELD, R.I.

1959 FORD STATION WAGEN
R.I. REG. RU700

Bernard W. Gaulin
SIGNED BY:

LT. F. BURSIE
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 55 N. P. File # 130

Date: 2/27/74
MONTH DAY YEAR

Time alarm received 6:40 P M Number of miles traveled 1

Time back in service M

Time back at station 6:44 P M

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

Location of alarm: (Street and Number) 100 MORGAN AVE.

Cause of fire BLUE

Description of building or occupancy: GREYSTONE ELEMENTARY 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. 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. F. BURSIE	T. PERNA	
W. ROY	D. FORTIN	
D. BAZZLE	W. DRAPER JR.	
T. RUSSO	P. RUGGIANO	
VEHICLE	**STATION**	**ON SCENE**
	C. ZAHN	
	F. ROTELLA	
	W. DRAPER	

REMARKS: CODE BLUE

Bernard Di Giulio
SIGNED BY:

LT. F. BURSIE
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 56 N. P. File # 131

Date: 2.28.74
MONTH DAY YEAR

Time alarm received 11:55 A M Number of miles traveled 2

Time back in service M

Time back at station 12:01 P M

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

Location of alarm: (Street and Number) 100 MORGAN AVE.

Cause of fire BLUE

Description of building or occupancy: GREYSTONE ELEMENTARY SCHOOL

Owner of building or occupancy: TOWN OF NORTH PROVIDENSE

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

Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. E. DI GIULIO	B. DI GIULIO	
W. ROY	W. DRAPER	
P. PHILLIPS		
VEHICLE	**STATION**	**ON SCENE**
D. FORTIN	N. PHELAND	

REMARKS: CODE BLUE

Bernard Di Giulio
SIGNED BY:

P. PHILLIPS
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 57 N. P. File # 132

Date: 2 (MONTH) 28 (DAY) 74 (YEAR)

Time alarm received 5:55 P M

Time back in service 6:10 P M

Time back at station 6:20 P M

Number of miles traveled 6

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

Location of alarm: (Street and Number) SMITHFIELD RD. (NEAR 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	100'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
1	PIKE POLE				

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 10min

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		
C. ZAHN		
J. BOREK		
D. BAZZLE		
S. COPPA		
K. MIDDLETON		
D. FORTIN		
N. PHELAND		
W. DRAPER JR		
VEHICLE	**STATION**	**ON SCENE**
T. PERNA	CAPT J. MURPHY	
	LT E. DI GIULIO	
	F. ROTELLA	
	W. DRAPER SR.	

REMARKS: CODE YELLOW, RUBBISH ON TOWN LAND

Lt. Ernie Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.