NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 268 N. P. File # 659

Date: 7/1/75 (MONTH / DAY / YEAR)

Time alarm received 11:18 A M Number of miles traveled 4

Time back in service ____ M

Time back at station 11:30 A M

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

Location of alarm: (Street and Number) 146 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	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)
XX ☒ 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
				1	PIKE POLE

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: 5

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. W. ROY		
LT. B. DI GIULIO		
J. MOLLO		
D. FORTIN		
H. DARBY		

VEHICLE	STATION	ON SCENE
	C. SALISBURY	
	ER. DI GIULIO	
	P. PHILLIPS	
	T. CACCIA	

REMARKS: SEAT OF OLD BULLDOZER WAS BURNING.

Lt. B. di Giulio

SIGNED BY:

CAPT. W. ROY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 269 N. P. File # 662

Date: 7/1/75
MONTH DAY YEAR

Time alarm received 1:22 P M Number of miles traveled 1

Time back in service 1:43 P M

Time back at station 1:47 P M

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

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

Cause of fire SET

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. B. DI GIULIO		
D. FORTIN		
J. MOLLO		
H. DARBY		

VEHICLE	STATION	ON SCENE
	A. CACCIA	
	ER. DI GIULIO	
	C. SALISBURY	
	P. PHILLIPS	

REMARKS: SMALL AREA OF WOODS BURNING 400 YDS. IN FROM END OF McGUIRE RD.

Lt. B. Di Giulio
SIGNED BY:

LT. B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 270 N. P. File # 667

Date: 7/175
MONTH DAY YEAR

Time alarm received 5:42 P M Number of miles traveled 0

Time back in service ____ M

Time back at station 5:43 P M

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

Location of alarm: (Street and Number) 2177 MINERAL SPRING AVE.

Cause of fire LOCKOUT

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	~~XXXXXXXXXXXX~~	
	N. PHELAND	
	W. DRAPER JR.	
	P. TREMENTOZZI	
	P. LYONS	
VEHICLE	**STATION**	**ON SCENE**
	LT. R. PAQUET	
	CAPT. W. ROY	
	J. LANE	
	L. MARTINO	
	J. BOREK	
	R. PARENTEAU	
	T. RUSSO	
	G. BULPITT SR.	
	G. BULPITT JR.	R. HUGHES
	M. RUSSO	J. ZIROLI

REMARKS: POLICE ON SCENE. LADDER NOT NEEDED.

Lt. R. P. Gulli
SIGNED BY:

N. PHELAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 271 N. P. File # 669

Date: 7/175
MONTH DAY YEAR

Time alarm received 7:39 PM Number of miles traveled 6

Time back in service 7:41 PM

Time back at station 8:05 PM

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

Location of alarm: (Street and Number) 41 STEERE AVE.

Cause of fire UNKNOWN

Description of building or occupancy: _____

Owner of building or occupancy: MR. &.MRS. SUNGREN

Owner's address: 41 STEERE AVE.

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	200'	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: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
N. PHELAND		
R. PARENTEAU		
P. TREMENTOZZI		
R. HUGHES		

VEHICLE	STATION	ON SCENE
LT. R. PAQUET	CAPT. J. MURPHY	
D. FORTIN	J. BOREK	
R. RATHIER	J. LANE	
J. PICCARDI	J. ZIROLIE	
	L. MARTINO	
	M. MAGGIACOMO	
	W. DRAPER JR.	D. HOUDE
	G. BULPITT SR.	H. DARBY
	G. BULIPTT JR.	C. ZAHN
	P. LYONS	M. MOONEY

REMARKS: WOODED RUBBISH IN REAR OF GARAGE.
OWNED BY MR. & MRS. SUNDGREN
41 steebe ave.
NO DAMAGE TO GARAGE.

Lt. R. DiGiulio
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 272 N. P. File # 670

Date: 7/1/75
MONTH DAY YEAR

Time alarm received 8:59 P M Number of miles traveled 9

Time back in service ____ M

Time back at station 9:34 P M

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

Location of alarm: (Street and Number) WOONASQUTUCKET & CHANLDER

Cause of fire SET

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	XX Code Yellow	☐ Water emergency
☐ 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	200'	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: 20

Defects on apparatus after alarm (if any): ____

Companies responding:

Engines(s) #1, 6, 3. Ladder(s) #1. Rescue(s) #1/ Car: #78

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
DIST. CHIEF J. MURPHY	N. PHELAND	
J. LANE	W. DRAPER JR.	
R. RARENTEAU	P. LYONS	
D. BAZZLE	E. BAZZLE	
P. TREMENTOZZI		
R. HUGHES		

VEHICLE	STATION	ON SCENE
DEP. CHIEF E. DI GIULIO		
J. BOREK	LT. R. PAQUET	
M. MOONEY	D. FORTIN	
G. BULPITT SR.	L. MARTINO	
D. HOUDE	J. PICCARDI	
	R. RATHIER	
	G. BULPITT JR.	
	J. ZIROLI	

REMARKS: FIRE IN JOHNSTON, ACROSS FROM ASPHALT PLANT
CALL JHONSTON AND STOOD BY UNTIL ON SCENE.

Lt. B. Di Giulio
SIGNED BY:

DIST. CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 273 N. P. File # 674

Date: 7/2/75
MONTH DAY YEAR

Time alarm received 2:15 P M Number of miles traveled 3

Time back in service ____ M

Time back at station 2:24 P M

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

Location of alarm: (Street and Number) 119 ANGEL AVE.

Cause of fire SET

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	30'	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: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF J. MURPHY		
LT. B. DI GIULIO		
R. HUGHES		
J. MOLLO		
D. BAZZLE		
H. DARBY		
P. LYONS		

VEHICLE	STATION	ON SCENE
	J. BOREK	
	ERN. DI GIULIO	
	C. SALISBURY	
	P. PHILLPS	
	J. ZIROLI	
	M. RUSSO	
	T. CACCIA	
	W. DRAPER SR.	

REMARKS: SMALL AREA OF GRASS SET BY 2 CHILDREN.

LT. B. Di Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 274 N. P. File # 688

Date: 7/4/75
MONTH DAY YEAR

Time alarm received 12:07 A M Number of miles traveled

Time back in service M

Time back at station 12:26 A M

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

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

Cause of fire

Description of building or occupancy:

Owner of building or occupancy: ANDOR'S T.V.

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)		ASSIT POLICE

	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) "2. Rescue(s) Car: #2

Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	J. BOREK	
	D. BAZZLE	
	J. SLIVA	
	V. NACASTRO	
	A. POCARO	
VEHICLE	**STATION**	STATION ~~ON SCENE~~
CHIEF E. DI GIULIO	CHIEF J. MURPHY	R. RATHIER
	CAPT. W. ROY	D. HOUDE
	LT. B. DI GIULIO	A. CORSINI
	CAPT. P. RUGGIANO	G. BULIPPT SR.
	D. FORTIN	G. BULPITT JR.
	J. LANE	
	L. MARTINO	
	P. PHILLIPS	
	M. MAGGACIMO	
	J. MOLLO	

REMARKS: POLICE REQUEST: HAD BREAK SUBJECT POSSIBLY ON ROOF.

Lt. B. Di Giulio
SIGNED BY:

D. BAZZLE
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

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

Date: 7/3/75
MONTH DAY YEAR

Time alarm received 7:25 PM ~~P~~ M Number of miles traveled 12

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) MUTUAL AID TO CITY OF PROVIDENCE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

	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. E. PELLAND	
	N. PHELAND	
	T. RUSSO	

VEHICLE	STATION	ON SCENE

REMARKS: MUTUAL AID TO CITY OF PROVIDENCE

Lt E. E. Pelland
SIGNED BY:

LT. E. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 276 N. P. File # 692

Date: 7/4/75
MONTH DAY YEAR

Time alarm received 9:09 P M Number of miles traveled 5

Time back in service ____ M

Time back at station 9:31 P M

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

Location of alarm: (Street and Number) 84 ANGELL 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
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
				1	HANDLIGHT

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: 10

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
T. E. PELLAND		
D. FORTIN		
T. RUSSO		
M. RUSSO		
R. HUGHES		
M. MAGGIAMO		
L. MARTINO		

VEHICLE	STATION	STATION ON SCENE
CAPT. R. RUGGIANO	CHIEF E. DI GIULIO	P. LYONS
G. BULPITT SR.	CHIEF J. MURPHY	J. PICCARDI
	J. BOREK	
	J. LANE	
	P. PHILLIPS	
	J. ZIROLI	
	J. MOLLO	
	R. RATHIER	
	H. DARBY	
	A. CORSINI	

REMARKS: BRUSH FIRE.
CORRECT ADDRESS. REAR 89 ANGELL AVE.

Lt. E. Di Giulio
SIGNED BY:

LT. E. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 277 N. P. File # 695

Date: 7/4/75
MONTH DAY YEAR

Time alarm received 9:31 P M Number of miles traveled

Time back in service M

Time back at station 9:38 P M

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

Location of alarm: (Street and Number) 101 ANGELL AVE.

Cause of fire

Description of building or occupancy:

Owner of building or occupancy: HENRY PICARD

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	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. E. PELLAND		
D. FORTIN		
T. RUSSO		
M. RUSSO		
R. HUGHES		
M. MAGGACIMO		
L. MARTINO		

VEHICLE	STATION	STATION ON SCENE
	CHIEF J. MURPHY	P. LYONS
	J. BOREK	J. PICCARDI
	J. LANE	
	P. PHILLIPS	
	J. ZIROLI	
	G. BULPITT SR.	
	J. MOLLO	
	R. RATHIER	
	H. DARBY	
	A. CORSINI	

REMARKS: HENRY PICCARD, COMPLAINT OF DISCOLORED WATER.
PROVIDENCE WATER CONTACTED TO CHECK SAME.

Lt. E. DiGrado
SIGNED BY:

LT. E. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 278 N. P. File # 701

Date: 7/4/75
MONTH DAY YEAR

Time alarm received 11:42 P M Number of miles traveled 7

Time back in service ____ M

Time back at station 12:10 P M

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

Location of alarm: (Street and Number) REAR DEBELLIS PHARMCY

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) DUMPSTER		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	60'	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: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO		
LT. E. PELLAND		
D. FORTIN		
J. BOREK		
M. RUSSO		
M. MAGGACIMO		
R. HUGHES		
L. MARTINO		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CHIEF J. MURPHY	
N. PHELAND	J. LANE	
T. RUSSO	J. MOLLO	
	R. RATHIER	
	H. DARBY	
	G. BULPITT SR.	
	G. BULPITT JR.	
	J. PICCARDI	
	P. LYONS	

REMARKS: DUMPSTER

Lt. E. DiGiulio
SIGNED BY:

LT. E. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 279 N. P. File # 700

Date: 7/4/75
MONTH DAY YEAR

Time alarm received 7:30 P M Number of miles traveled 13

Time back in service ____ M

Time back at station 11:59 P M

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

Location of alarm: (Street and Number) MUTUAL AID TO CITY OF PROVIDENCE

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CAPT: W. ROY	
	D. BAZZLE	
	T. PERNA	

VEHICLE	STATION	ON SCENE

REMARKS: MUTUAL AID TO CITY OF PROVIDENCE.
HEALTH BLDG. BOX 4189, CODE BLUE.
WICKENDEN ST. RUBBISH.

Lt W. Roy
SIGNED BY:

CAPT. W. ROY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 280 N. P. File # 702

Date: 7/5/75 (MONTH / DAY / YEAR)

Time alarm received 12:54 A M Number of miles traveled 6

Time back in service ____ M

Time back at station 1:14 A 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: ____

Owner of building or occupancy: DEBELLIS PHARM.

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) DUMPSTER		

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	2/50'	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: 10

Defects on apparatus after alarm (if any): CLAMP ON BOOSTER HOLDER BROKE.

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO		
T. PERNA		
D. BAZZLE		
R. RATHIER		
J. PICCARDI		
M..MAGGACIMO		
R. HUGHES		

VEHICLE	STATION	STATION ON SCENE
	CHIEF J. MURPHY	M. RUSSO
	CAPT. W. ROY	P. LYONS
	LT. E. PELLAND	L. MARTINO
	D. FORTIN	
	J. BOREK	
	J. LANE	
	J. MOLLO	
	H. DARBY	
	G. BULPITT SR.	
	G. BULPITT JR.	

REMARKS: DUMPSTER.

Lt. B. di Iacobo
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 281 N. P. File # 704

Date: 7/5/75 (MONTH / DAY / YEAR)

Time alarm received 6:10 P M Number of miles traveled 6

Time back in service ____ M

Time back at station 6:27 P M

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

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

Cause of fire SET

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	10'	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
4	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	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: #2. 21.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
W. DRAPER JR.		
D. BAZZLE		
R. HUGHES		
P. LYONS		
J. LANE		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT. P. RUGGIANO	
CHIEF J. MURPHY	G. BULPITT SR.	
CAPT. W. ROY	G. BULPITT JR.	
C. HARRISON	A. CORSINI	
T. PERNA	J. PICCARRI	
R. RATHIER	J. BOREK	
	N. PHELAND	
	D. FORTIN	
	M. RUSSO	

REMARKS: 60' AREA OF BRUSH.

Lt B. Di Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 282 N. P. File # 709

Date: 7/7/75
MONTH DAY YEAR

Time alarm received 10:04 PM Number of miles traveled 2

Time back in service 10:06 PM

Time back at station 10:11 PM

Alarm received by: Box # 241 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) DOUGLAS & FITZHUGH

Cause of fire CODE BLUE

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CAPT. P. RUGGIANO	
	J. MOLLO	
	D. BAZZLE	
	R. HUGHES	
	P. LYONS	

VEHICLE	STATION	STATION ON SCENE
	CHIEF J. MURPHY	M. MAGGACIMO
	CAPT. W. ROY	M. MOONEY
	J. BOREK	R. RATHIER
	C. HARRISON	M. RUSSO
	E. BAZZLE	J. PICCARDI
	J. ZIROLI	
	J. LANE	
	G. BULPITT SR.	
	P. TREMENTOZZI	
	D. FORTIN	

REMARKS: CODE BLUE FROM ENG.#3.

Lt. B. DiGiulio

SIGNED BY:

CAPT. P. RUGGIANO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 283 N. P. File # 712

Date: 7/8/75 (MONTH / DAY / YEAR)

Time alarm received 2:25 PM Number of miles traveled 3

Time back in service ____ M

Time back at station 3:04 PM

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

Location of alarm: (Street and Number) SMITH ST (EVANS FIELD)

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

	EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED
	Carbon Dioxide		Booster	30'	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 #
	J. MOLLO	
	H. PARISI	

VEHICLE	STATION	ON SCENE
	LT. B. DI GIULIO	
	B. CHARELLO	
	D. BAZZLE	
	W. DRAPER SR.	

REMARKS: CHANGE SPORT LIGHT AT EVANS FIELD FOR REC. DEPT.

LT B. Di Giulio
SIGNED BY:

H. PARISI
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 284 N. P. File # 713

Date: 7/8/75
MONTH DAY YEAR

Time alarm received 5:36 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 5:39 P M

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

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

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	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		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
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. W. ROY	J. BOREK	
LT. B. DI GIULIO	D. HOUGE	
D. FORTIN	M. MOONEY	
M. MAGGIACOMO	D. BAZZLE	
R. HUGHES		
VEHICLE	**STATION**	**ON SCENE**
	W. DRAPER JR.	
	P. TREMENTOZZI	
	J. PICCARDI	
	J. ZIROLI	

REMARKS: CODE YELLOW FROM ENG.#2. AUTO ACCIDENT.

Lt. B. Di Giulio
SIGNED BY:

CAPT. W. ROY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 285 N. P. File # 714

Date: 7/8/75 (MONTH / DAY / YEAR)

Time alarm received 9:44 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 9:45 P M

Alarm received by: Box # 241 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) DOUGLAS & FITZHUGH

Cause of fire CODE BLUE

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): TRUCK BREAKING DOWN, (LADD. #1.)

Companies responding: ____

Engines(s) #3, 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 #
	J. BOREK	
	M. MOONEY	
	R. HUGHES	
	A. CORSINI	

VEHICLE	STATION	ON SCENE
	CHIEF J, MURPHY	
	CAPT. P. RUGGIANO	
	D. FORTIN	
	M. MAGGIACOMO	
	D. HOUGE	
	P. TREMENTOZZI	
	J. PICCARDI	
	F. ROTELLA	
	W. DRAPER JR.	

REMARKS: CODE BLUE FROM ENG.#3.

Lt B. DiGiulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 286 N. P. File # 715

Date: 7/8/75
MONTH DAY YEAR

Time alarm received 11:29 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 11:32 P M

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

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

Cause of fire CODE BLUE

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	J. BOREK	
	D. FORTIN	
	D. HOUDE	

VEHICLE	STATION	ON SCENE
	CAPT. W. ROY	
	CAPT. P. RUGGIANO	
	B. DI GIULIO	
	M. MAGGIACOMO	
	M. MOONEY	
	N. PHELAND	
	R. RATHIER	
	G. BULPITT SR.	
	G. BULPITT JR.	
	J. PICCARDI	
	P. PHILLIPS	

REMARKS: CODE BLUE FROM ENG. #2.

Lt. B. [illegible]
SIGNED BY:

D. FORTIN
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 287 N. P. File # 716

Date: 7/9/75 (MONTH / DAY / YEAR)

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

Time back in service ____ M

Time back at station 11:21 P M

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

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

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

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. b. di giulio		
B. CHARELLO		
J. NOTARANTONIO		

VEHICLE	STATION	ON SCENE
CAPT. W. ROY	J. MOLLO	
W. DRAPER JR.	H. PARISI	
D. BAZZLE		
E. BAZZLE		
D. FORTIN		

REMARKS: AUTO FIRE: OUT ON ARRIVAL. LIVE BATTERY CABKE SHORTED OUT. WIRES BURNED. SLIGHT DAMAGE. 1972/4 door PLYMOUTH (YELLOW)
OWNER: WILLIAM CARDARELLI R.I.REG. IZ232
2037 MINERAL SPRING AVE.
NO. PROV.R.I.

Lt B. Di Giulio
SIGNED BY:

LT. B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 288 N. P. File # 720

Date: 7/11/75 (MONTH / DAY / YEAR)

Time alarm received 5:18 A M Number of miles traveled 4

Time back in service ____ M

Time back at station 5:33 A M

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

Location of alarm: (Street and Number) 2 GREYSTON AVE.

Cause of fire CODE BLUE

Description of building or occupancy: MILL

Owner of building or occupancy: WORSCTER TEX. CO.

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		XX ☒ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		WATER FLOW

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, 3. 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 #
N. PHELAND	CHIEF J. MURPHY	
D. BAZZLE	G. BULPITT SR.	
J. LANE	J. PICCARDI	
R. PARENTEAU	W. DRAPER JR.	
	G. BULPITT JR.	
	P. LYONS	
VEHICLE	**STATION**	**ON SCENE**
D. FORTIN	J. MOLLO	
F. ROTEELA		

REMARKS: WATER FLOW, CODE BLUE
R.I.E.P. ON SCENE.

SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 289 N. P. File # 721

Date: 7/11/75
MONTH DAY YEAR

Time alarm received 504 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 5:08 P M

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

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

Cause of fire CODE BLUE

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. W. ROY	CAPT. P. RUGGIANO	
C. HARRISON	G. BULPITT JR.	
E. BAZZLE	G. BULPITT SR.	
J. LANE	P. TREMENTOZZI	
J. PICCARDI	D. BAZZLE	
	M. MAGGIACOMO	
	R. HUGHES	
	J. ZIROLI	
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO	J. MOLLO	
	T. PERNA	
	D. FORTIN	

REMARKS: CODE BLUE FROM ENG.#6.

Lt. B. Di Giulio
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 290 N. P. File # 722

Date: 7/11/75
MONTH DAY YEAR

Time alarm received 5:37 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 6:07 P M

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

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

Cause of fire SET

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: 5

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO		
D. FORTIN		
E. BAZZLE		
R. HUGHES		
C. HARRISON		
D. BAZZLE		

VEHICLE	STATION	ON SCENE
J. PICCARDI	J. LANE	
	J. BOREK	
	M. MAGGACOMO	
	P. TREMENTOZZI	
	J. ZIROLI	
	L. MARTINO	
	J. MOLLO	

REMARKS: BRUSH FIRE IN FIELD IN BACK OF 79 LOCUST AVE.
CALLED POLICE TO LOCATION, J. PICCARDI SAW TWO BOYS TRYING TO LIGHT BRUSH

Lt. P. DiGiulio
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 291 N. P. File # 723

Date: 7/12/75
MONTH DAY YEAR

Time alarm received 9:00 A M Number of miles traveled 0

Time back in service ____ M

Time back at station 9:08 A M

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

Location of alarm: (Street and Number) 1967 MINERAL SPRING AVE.

Cause of fire UNKNOWN

Description of building or occupancy: POLICE & FIRE HQT.

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
☐ Fire in dump		☐ False alarm
☐ Fire in vehicle		☐ Miscellaneous alarm (describe)
XX ☐ Miscellaneous fires (describe) ELECTRAL		

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: #1.

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
CAPT. W. ROY		
CAPT. P. RUGGIANO		
B. DI GIULIO		
J. BOREK		
D. FORTIN		
D. HOUDE		
D. BAZZLE		
J. PICCARDI		
M. MOONEY		
VEHICLE	**STATION**	**ON SCENE**
P. TREMENTOZZI		
T. PERNA		
R. HUGHES		
J. LANE		
J. ZIROLI		
W. DRAPER SR.		

REMARKS: TRUCKS DID NOT LEAVE STATION.
CIRCULATOR MOTOR #4. SMOKEING. SMOKE THROUGHOUT BUILDING, FROM DUCK WORK.
PROBLEM MAIN PANEL. NARRAGANSETT ELECTRIC CALLED.

Lt B Di Giulio
SIGNED BY:

CHIEF E. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 292 N. P. File # 727

Date: 7/12/75
MONTH DAY YEAR

Time alarm received 11:07 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 11:13 P M

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

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

Cause of fire CODE BLUE

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) ____ Car: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF J. MURPHY	D. HOUDE	
CAPT. W. ROY	D. BAZZLE	
J. BOREK	M. MAGGIACOMO	
D. FORTIN	R. HUGHES	
M. MOONEY	J. ZIROLI	
P.TREMENTOZZI	R. RATHIER	
P. PHILLIPS	J. PICCARDI	

VEHICLE	STATION	ON SCENE

REMARKS: CODE BULE FROM ENG.#1, CALL FOR FIRE AT 15 ATLANTIC BLVD. NO SUCH NUMBER.

SIGNED BY: Lt. B. McGinnis

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 293 N. P. File # 729

Date: 7/13/75
MONTH DAY YEAR

Time alarm received 12:52 A M Number of miles traveled 3

Time back in service ____ M

Time back at station 1:00 A M

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

Location of alarm: (Street and Number) 23 RENA ST.

Cause of fire CODE BLUE

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	J. BOREK	
	D. FORTIN	
	M. MAGGIACOMO	
	P. TRMENTOZZI	
	P. PHILLIPS	
	J. PICCARDI	
	R. HUGHES	

VEHICLE	STATION	ON SCENE
	CHIEF J. MURPHY	
	CAPT. W. ROY	
	B. DI GIULIO	
	D. HOUDE	
	D. BAZZLE	
	M. MOONEY	
	G. BULPITT JR.	
	R. RATHIER	
	L. MARTINO	

REMARKS: CODE BLUE FROM ENG.#2.

B. Di Giulio
SIGNED BY:

D. FORTIN
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 294 N. P. File # 732

Date: 7/13/75 (MONTH / DAY / YEAR)

Time alarm received 10:40 A M Number of miles traveled 2

Time back in service ____ M

Time back at station 10:52 A M

Alarm received by: Box # 7123 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) 610 SMITHFIELD RD.

Cause of fire ACCIDENTAL ALARM

Description of building or occupancy: HOPKINS HEALTH CENTER

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, 4, Ladder(s) #1, 2. Rescue(s) #1, 2. Car: #21

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
T.PERNA	D. HOUDE	
D. FORTIN	D. BAZZLE	
M. MOONEY	M. MAGGIACOMO	
R. HUGHES	P. TRMENTOZZI	

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CHIEF J. MURPHY	
J. PICCARDI	CAPT. W. ROY	
	B. DI GIULIO	
	R. PARENTEAU	
	C. HARRISON	
	L. MARTINO	

REMARKS: ALARM SE T OFF BY SMOKE DEECTORS.
CODE BLUE.

Lt. B. Di Giulio
SIGNED BY:

D. FORTIN
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 295 N. P. File # 733

Date: 7/13/75 (MONTH / DAY / YEAR)

Time alarm received 12:59 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 1:02 P M

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

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

Cause of fire CODE BLUE

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) ____ Car: ____

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	d. fortin	
	D. HOUDE	
	D. BAZZLE	
	M. MAGGIACOMO	
	R. HUGHES	
VEHICLE	**STATION**	**ON SCENE**
CAPT. W. ROY	J. BOREK	
	M. MOONEY	
	N. PHELAND	
	G. BULPITT SR.	
	G. BULPITT JR.	
	C. HARRISON	
	J. ZIROLI	
	J. PICCARDI	
	B. DI GIULIO	

REMARKS: CODE BLUE FROM ENG.#6.

W. B. diGiulio
SIGNED BY:

CAPT. W. ROY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 296 N. P. File # 736

Date: 7/14/75 (MONTH / DAY / YEAR)

Time alarm received 10:22 P M Number of miles traveled 10

Time back in service ____ M

Time back at station 11:01 P M

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

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

Cause of fire SET

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	XX ☐ Code Yellow	☐ Water emergency
☐ 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	100'	Booster 1½		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	FLOODLIGHT
				1	CROWBAR

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: 15

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ENG.#2, (SMITHFIELD)

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. W. ROY		
LT. E. PELLAND		
H. DARBY		
M. RUSSO		
D. BAZZLE		

VEHICLE	STATION	STATION ~~ON SCENE~~
N. PHELAND	CHIEF J. MURPHY	J. ZIROLI
C. HARRISON	CAPT. P. RUGGIANO	J. LANE
	R. RATHIER	M. MAGGAICOMO
	J. PICCARDI	M. MOONEY
	L. MARTINO	
	P. PHILLIPS	
	R. PARENTEAU	
	G. BULPITT JR.	
	J. MOLLO	
	R. HUGHES	

REMARKS: CAR DROVE TO STATION TO REPORT CAR FIRE NEAR DUMP.
FIRE IN SMITHFIELD. CALLED SMITHFIELD. STAYED ON SCENE UNTIL THEY ARRIVED.
R.I. REG.#IX457. LINCOLN CONTE.
CAR TOTAL LOSS.
CAR MOST LIKEY STOLEN.

Lt. B. Di Giulio
SIGNED BY:

LT. E. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 297 N. P. File # 738

Date: 7/15/75 (MONTH / DAY / YEAR)

Time alarm received 8:44 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 8:46 P M

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

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

Cause of fire CODE BLUE

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. E. PELLAND	P. LYONS	
G. BULPITT SR.	W. DRAPER JR.	
R. HUGHES		
R. PARENTEAU		
D. FORTIN		
M. RUSSO		
VEHICLE	**STATION**	**ON SCENE**
CHIEF J. MURPHY	LT. R. PAQUET	
	N. PHELAND	
	G. BULPITT JR.	
	J. ZIROLI	
	M. MOONEY	
	L. MARTINO	
	P. PHILLIPS	

REMARKS: CODE BLUE FROM ENG.#6.

Lt B. DiGiulio
SIGNED BY:

LT. E. PELLAND
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 298 N. P. File # 739

Date: 7/16/75 (MONTH / DAY / YEAR)

Time alarm received 12:06 A M Number of miles traveled 2

Time back in service ____ M

Time back at station 12:10 A M

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

Location of alarm: (Street and Number) 17 CHANDLER XXE. ST.

Cause of fire CODE BLUE

Description of building or occupancy: ____

Owner of building or occupancy: 1zz1

Owner's address: same

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
- ☒ XXCode Blue

ALARM WITH NO FIRE

- ☐ Rescue or emergency
- ☐ Water emergency
- ☐ Lockout
- ☐ Accidental alarms
- ☐ False alarm
- ☐ Miscellaneous alarm (describe)

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		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: #21

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
N. PHELAND	CAPT. W. ROY	
G. BULPITT SR.	G. BULPITT JR.	
P. LYONS	P. TREMENTOZZI	
LT. E. PELLAND	R. PARENTEAU	
R. HUGHES		
J. LANE		
J. PICCARDI		
VEHICLE	**STATION**	**ON SCENE**
CHIEF J. MURPHY	CAPT. R.RUGGIANO	
P. PHILLIPS	W. DRAPER JR	
	J. MOLLO	
	D. BAZZLE	
	J. BOREK	
	M. MAGGIACOMO	
	R. RATHIER	
	L. MARTINO	

REMARKS: CODE BLUE FROM ENG.#1, OCCUPANTS OF HOUSE DID NIT CALL FIRE DEPT.

Lt. B. DiGulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 299 N. P. File # 742

Date: 7/16/75
MONTH DAY YEAR

Time alarm received 11:26 PM Number of miles traveled 1

Time back in service ____ M

Time back at station 11:28 PM

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

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

Cause of fire CODE BLUE

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CAPT. P. RUGGIANO	
	P. LOMONS	
	C. HARRISON	
	R. PARENTEAU	
	J. LANE	
VEHICLE	**STATION**	**ON SCENE**
	CHIEF J. MURPHY	
	CAPT. W. ROY	
	LT. E. PELLAND	
	N. PHELAND	
	J. MOLLO	
	T. PERNA	
	R. HUGHES	
	J. ZIROLI	
	J. BOREK	
	M. MAGGIACOMO	

REMARKS: CODE BLUE FROM ENG.#2.

A. B. DiGiulio
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 300 N. P. File # 744

Date: 7/16/75
MONTH DAY YEAR

Time alarm received 2:34 PM Number of miles traveled 1

Time back in service ____ M

Time back at station 2:37 PM

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

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

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: JOHNNY'S TAVERN (REAR)

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) ____ Car: #21.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	C. HARRISON	
	J. LANE	
	R. PARENTEAU	
	N. PHELAND	
VEHICLE	**STATION**	**ON SCENE**
CHIEF J. MURPHY	CAPT. W. ROY	
	CAPT. P.RUGGIANO	
	J. MOLLO	
	T. PERNA	
	E. BAZZLE	
	R. HUGHES	
	J. ZIROLI	
	G. BULPITT SR.	
	G. BULPITT JR.	

REMARKS: CODE YELLOW FOR ENG.#6.

Lt B-Hi Gruber
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 301 N. P. File # 745

Date: 7/17/75 (MONTH / DAY / YEAR)

Time alarm received 4:~~XX~~50 A M Number of miles traveled 15

Time back in service ____ M

Time back at station 5:58 A M

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

Location of alarm: (Street and Number) ~~SMITH~~ SMITH ST & EAST AVE.

Cause of fire AUTO ACCIDENT

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	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	
1	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: 15

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #1 Ladder(s) ____ Rescue(s) #1. Car: #2, 21.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
R. HUGHES		
J. ZIROLI		
J. LANE		
R. PARENTEAU		
N. PHELAND		

VEHICLE	STATION	XXXXXXXXX
CHIEF E. DI GIULIO	C. HARRISON	VEHICLE
CHIEF J. MURPHY		F. ROTELLA
CAPT. P. RUGGIANO		M. RUSSO
CAPT. W. ROY		J. PICCARDI
J. MOLLO		L. MARTINO
T. PERNA		
G. BULPITT SR.		
G, BULPITT JR.		
D. FORTIN		
M. MOONEY		

REMARKS: AUTO HIT POLE AT CORNER OF EAST AVE. & SMITH ST.AND TIPPED OVER. R.I. REG.#ub347--1971 PONTIAC STATION WAGON, OWNED BY TOM BYNE, PUTMAN PIKE, HARMONY, R.I. AGE.47. COMPLAINED OF CHEST PAINS TAKEN TO ROGER WILLIAMS GEN. HOSPITAL BY RES.#1. WASHED DOWN AREA.

Lt. B. W. Murphy

SIGNED BY:

CHIEF J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 302 N. P. File # 747

Date: 7/17/75 (MONTH / DAY / YEAR)

Time alarm received 2:39 P M Number of miles traveled 7

Time back in service 3:05 P M

Time back at station 3:15 P M

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

Location of alarm: (Street and Number) CENTREDALE BY PASS

Cause of fire UNKNOWN

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	400'	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				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: #1. 11.

Other companies responding: S.S. ENG.#6.

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

ENGINE(S) #	LADDER(S) #	RESCUE #
~~LT. B. DI GIULIO~~		
~~B. CHARELLO~~		
J. NOTARANTONIO		

VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY	J. MOLLO	
J. PICCARDI	H. PARISI	
J. BOREK	G. BULPITT SR.	
~~XXXXXXXX~~		
P.TREMENTOZZI		
N. PHELAND		
R. HUGHES		
W. DRAPER JR.		
W. DRAPER SR.		

REMARKS: BRUSH FIRE ON BY PASS, BURNED TO MARGON AVE.

Lt B DeGiulio

SIGNED BY:

CHIEF J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 303 N. P. File # 748

Date: 7/17/75
MONTH DAY YEAR

Time alarm received 3:01 P M Number of miles traveled 1

Time back in service ____ M

Time back at station 3:13 P M

Alarm received by: Box # 7422 Phone ____ Other ____ (Describe)

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

Cause of fire ACCIDENTAL

Description of building or occupancy: LADY OF FATIMA NURSING HOME

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		XX 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, 3, 6. Ladder(s) #1, 2. Rescue(s) #2. Car: #1.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CHIEF J. MURPHY	
	J. MOLLO	
	H. PARISI	
	N. PHELAND	
	W. DRAPER JR.	
	G. BULPITT SR.	
VEHICLE	**STATION**	**ON SCENE**
	LT. B. DI GIULIO	
	B. CHARELLO	
	J. PICCARDI	
	J. BOREK	
	R. PARENTEAU	
	P. TREMENTOZZI	
	J. NOTARANTONIO	

REMARKS: ACCIDENTAL ALARM. NOTIFIED FIRE ALARM TO RESET BOX.

Lt. B. Di Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 304 N. P. File # 751

Date: 7/18/75
MONTH DAY YEAR

Time alarm received 7:37 P M Number of miles traveled 2

Time back in service 7:47 P M

Time back at station 7:57 P M

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

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

Cause of fire SET

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide		Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
4	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: #2,21.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. W. ROY		
H. DARBY		
L. MARTINO		
P. PHILLIPS		
W. DRAPER JR.		
R. HUGHES		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT. P. RUGGIANO	
CHIEF J. MURPHY	R. RATHIER	
M. RUSSO	J. PICCARDI	
J. ZIROLI	D. BAZZLE	
M. MOONEY	J. BOREK	
	D. FORTIN	
	M. MAGGIACOMO	

REMARKS: CODE YELLOW DUMP.
REPORTED TO POLICE 2 BURNED OUT CARS IN THIS AREA.
POLICE CHECKED V.W. REPORTED STOLEN JUNE 16th FROM LINCOLN,R.I.

Lt. P. DiGiulio
SIGNED BY:

CAPT. W. ROY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 305 N. P. File # 756

Date: 7/20/75
MONTH DAY YEAR

Time alarm received 4:51 PM Number of miles traveled 2

Time back in service ____ M

Time back at station 4:57 P M

Alarm received by: Box # 144 Phone ____ Other ____ (Describe)

Location of alarm: (Street and Number) SMITH & WATERMAN

Cause of fire CODE BLUE

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, 6. Ladder(s) #1. Rescue(s) ____ Car: #21.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO	P. TRMENTOZZI	
G. BULPITT SR.	J. LANE	
G. BULPITT JR.	J. BOREK	
C. HARRISON	J. PICCARDI	
T. PERNA	E. BAZZLE	
A. CORSINI	J. ZIROLI	
M. MAGGIACOMO		
VEHICLE	**STATION**	**ON SCENE**
CHIEF J. MURPHY	J. MOLLO	
F. ROTELLA	D. BAZZLE	
W. DRAPER JR.	R. HUGHES	
W. DRAPER SR.	D. FORTIN	

REMARKS: CODE BLUE FROM ENG.#1.

Lt. B. Di Giulio

SIGNED BY:

CHIEF J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 306 N. P. File # 761

Date: 7/22/75
MONTH DAY YEAR

Time alarm received 9:45 P M Number of miles traveled 2

Time back in service M

Time back at station 9:55 P M

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

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

Cause of fire CODE BLUE

Description of building or occupancy: VILL VERSAILLES APTTS.

Owner of building or occupancy:

Owner's address:

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

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

APPARATUS REPORT

Working time of pump: Hours: minutes:

Defects on apparatus after alarm (if any):

Companies responding:

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

Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	J.MOLLO	
	G. BULPITT SR.	
	A. CORSINI	
	M. MAGGIACOMO	
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO	CHIEF J. MURPHY	
~~EMXETXJXXMXRRMXX~~	J. BOREK	
F. ROTELLA	D. FORTIN	
	M. MOONEY	
	J. ZIROLI	
	R. RATHIER	
	L. MARTINN	

REMARKS: CODE BLUE FROM ENG.#3.

Lt. E Di Giulio
SIGNED BY:

A. CORSINI
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 307 N. P. File # 765

Date: 7/24/75 (MONTH / DAY / YEAR)

Time alarm received 12:29 A M Number of miles traveled 1

Time back in service ____ M

Time back at station 12:32 A M

Alarm received by: Box # 4321 Phone ____ Other ____ (Describe)

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

Cause of fire CODE BLUE

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #2.6. Ladder(s) #1. Rescue(s) ____ Car: #21.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	R. PARENTEAU	
	P. TREMENTOZZI	
	P. LYONS	
VEHICLE	**STATION**	**ON SCENE**
CHIEF J. MURPHY	CAPT. W. ROY	
	W. DRAPER JR.	
	N. P'ELAND	
	G. BULPITT SR.	
	G. BULPITT JR.	
	D. HOUDE	
	R. HUGHES	
	J. PICCARDI	

REMARKS: CODE BLUE FROM ENG.#".

Lt. B. de Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 308 N. P. File # 769

Date: 7/25/75
MONTH DAY YEAR

Time alarm received 9:05 P M Number of miles traveled 1

Time back in service M

Time back at station 9:07 P M

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

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

Cause of fire CODE BLUE

Description of building or occupancy: APT.#6.

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: #2.

Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. R. RUGGIANO	CAPT. W. ROY	
P. TREMENTOZZI	T. RUSSO	
J. MOLLO	M. MAGGIACOMO	
E. BAZZLE	C. HARRISON	
R. HUGHES	J. ZIROLI	
J. LANE		
T. PERNA		
D. FORTIN		
H. DARBY		
VEHICLE	**STATION**	**ON SCENE**
CHIEF E. DI GIULIO	N. PHELAND	
W. DRAPER JR.	G. BULPITT SR.	
P. PHILLIPS	W. DRAPER SR.	
	A. CORSINI	
	M. MOONEY	
	J. PICCARDI	

REMARKS: CALL CAME IN FROM J.F.A.
VOICE ON TAPE IDENTIFIED, SEE POLICE DEPT. REPORT FOR INFORMANTION.

Lt. B. DiGiulio
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 309 N. P. File # 770

Date: 7/25/75
MONTH DAY YEAR

Time alarm received 11:28 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 11:29 P M

Alarm received by: Box # 211 Phone ____ Other ____ (Describe)

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

Cause of fire CODE BLUE

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #3,4. Ladder(s) #1. Rescue(s) ____ Car: #2,21.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	C. HARRISON	
	J. ZIROLI	
	J. LANE	
	J. MOLLO	
	A. CORSINI	

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT. P. RUGGIANO	
CHIEF J. MURPHY	P. TREMENTOZZI	
CAPT. W. ROY	E. BAZZLE	
	R. HUGHES	
	T. PERNA	
	D. FORTIN	
	R. RATHIER	
	J. PICCARDI	

REMARKS: CODE BLUE FROM ENG.#3.

Lt. B DiGiulio
SIGNED BY:

J. LANE
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 310 N. P. File # 771

Date: 7/26/75
MONTH DAY YEAR

Time alarm received 1:21 A M Number of miles traveled 9

Time back in service M

Time back at station 2:03 A M

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

Location of alarm: (Street and Number) CENTREDALE 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	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	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	
1	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment
				1	HANDLIGHT

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) #1. Car: #2.21.

Other companies responding: SS Res #3

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO		
CAPT. W. ROY		
R. HUGHES		
J. LANE		
T. PERNA		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	P. TREMENTO ZZI	
CHIEF J. MURPHY	C. HARRISON	
D. FORTIN	E. BAZZLE	
N. PHELAND	J. ZIROLI	
W. DRAPER SR.		
J. MOLLO		
J. BOREK		
F. ROTELLA		
J. PICCARDI		

REMARKS: CODE YELLOW, AUTO ACCIDENT (2CARS)

ELEANA RUSSO	BEATRICE SARAVO
42 MANNING ST,	28 SOUTH LOCUST AVE.
NO. PROV. R.I.	NO. PROV. R.I.
73 BUICK--2 DOOR	75 FORD--2 DOOR
R.I. REG.JR726	R.I. REG.WW213

Lt. B. Ho Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

RES. FILE--727

NO. PROVIDENCE FIRE DEPARTMENT

– SECONDARY RESCUE REPORTS –

FILE--- 771

CO. FILE-- 310

DATE: 7/26/75 TIME: ARRIVED 1;21 A.M. RETURNED 2;03 A.M.

NAME: ELEANA RUSSO AGE: 20

ADDRESS: 42 MANNING ST. ALARM BY: WALK IN

NORTH PROVIDENCE, R.I.

LOCATION OF RESCUE SMITH ST ON BY PASS

EXAMINATION

SKULL * LACERATION OVER LEFT EYE

EYES *

EARS *

NOSE *

MOUTH *

CHEST *

ABDOMEN *

UPPER EXTREMITIES *

LOWER EXTREMITIES * INJURY TO LEFT LEG

POSITION OF PATIENT WHEN FOUND: LYING ON SIDEWALK

WAS PATIENT CONSCIOUS? YES

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN) YES

PATIENT TRANSPORTED TO: ROGER WILLIAMS GENERAL HOSPITAL BY RESCUE#1.

IF PATIENT WAS NOT TRANSPORTED EXPLAIN:

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

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

4"x4" GAUGE PAD OVER LACERATION ABOVE LEFT EYE
VICTIM COMPLAINED OF PAIN OF LEFT LEG.
SPLINTED SAME.

SIGNED: Lt B. DiGiulio OFFICER IN CHARGE: CAPT. RUGGIANO

RESCUE CO. NO. ENG.#1.

res. file--727

NO. PROVIDENCE FIRE DEPARTMENT

– SECONDARY RESCUE REPORTS –

FILE-- 771

CO. FILE--310

DATE: 7/26/75 TIME: ARRIVED 1:21 A.M. RETURNED 2:03 A.M.

NAME: BEATRICE SARAVO AGE: 50

ADDRESS: 28 SOUTH LOCUST AVE. ALARM BY: WALK IN

NORTH PROVIDENCE, R.I.

LOCATION OF RESCUE SMITH ST ON BY PASS

EXAMINATION

SKULL * LACERATION OVER RIGHT EYE

EYES *

EARS *

NOSE *

MOUTH *

CHEST *

ABDOMEN *

UPPER EXTREMITIES *

LOWER EXTREMITIES * POSSIBLE FRACTURE LEFT KNEE

POSITION OF PATIENT WHEN FOUND: SITTING IN CAR

WAS PATIENT CONSCIOUS? YES

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN) YES

PATIENT TRANSPORTED TO: ROGER WILLIAMS GENERAL HOSPITAL BY RESCUE#3.

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)

PUT 4"x4" GAUGE PAD OVER RIGHT EYE

SIGNED: OFFICER IN CHARGE: CAPT. P. RUGGIANO

RESCUE CO. NO. ENG #1

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 311 N. P. File # 773

Date: 7/26/75 (MONTH / DAY / YEAR)

Time alarm received 8:59 P M Number of miles traveled 16

Time back in service ____ M

Time back at station 10:23 P M

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

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

Cause of fire SET

Description of building or occupancy: RANDALL's RESERVATION (LOWER ROAD)

Owner of building or occupancy: STATE OF RHODE ISLAND

Owner's address: ____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
1	Carbon Dioxide	250'	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
				1pr.	asbestos gloves
				3	HANDLIGHTS

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: 30

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 J. MURPHY		
LT. E. PELLAND		
T. RUSSO		
R. RATHIER		
M. RUSSO		

VEHICLE	STATION	ON SCENE
CAPT. W. ROY	CHIEF E. DI GIULIO	
D. FORTIN	CAPT. P. RUGGIANO	
M. MAGGIACOMO	H. DARBY	
	J. PICCARDI	
	L. MARTINO	
	P. PHILLIPS	
	J. MOLLO	
	R. HUGHES	
	J. ZIROLI	

REMARKS: CAR VOLKS WAGON WR242 TOTALLY INVOLVED . TOTAL LOSS. ASLO SMALL AREA OF WOODS BURNING. NOTIFIED POLICE WHO RESPONDED.

MARMANO BORCHAT
2 MANILA AVE.
NORTH PROVIDENCE, R.I.

1970 VOLKS WAGON
COLOR. RED
, R.I. REG. WR242

Lt B. DiGiulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

CODE SHEET

1.	Month in which fire occurred	7
2.	Community in which fire occurred	24
3.	Cause	2
4.	If Accidental, specific cause	-
5.	If Incendiary, suspected motive	3
6.	If Suspicious, suspected motive	3
7.	Suspicion directed toward	3
8.	Type of structure	12
9.	Occupied by whom	3
10.	Insurance	?
11.	Total Amount of Insurance	-
12.	Estimated loss	₱1700.00

Name and Address of Owner MARMANO BORCHAT
2 MANILA Ave No. PROV.

Name of Occupant

COMPLETE AND RETURN TO STATE DIVISION OF FIRE SAFETY

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 312 N. P. File # 776

Date: 7/27/75
MONTH DAY YEAR

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

Time back in service ____ M

Time back at station 2:18 A M

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

Location of alarm: (Street and Number) MINERAL SPRING & CENTREDALE BY PASS

Cause of fire AUTO ACCIDENT

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

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: #21.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. E. PELLAND		
R. RATHIER		
M. RUSSO		
T. RUSSO		
D. BAZZLE		

VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY	H. DARBY	
CAPT.W. ROY	P. PHILLIPS	
D. HOUDE	L. MARTINO	

REMARKS: CAR HIT POLE AT INTERSECTION.

ROUPEN ZEVTOUNDJIAN (AGE. 39) 1973 OLDS. COLOR BLUE.
77 SACRAMENTO ST. MASS. REG. 617-956
SOMERVILLE, MASS.

H. B. Di Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

RES. FILE--731

CO. FILE--312

NO. PROVIDENCE FIRE DEPARTMENT
– SECONDARY RESCUE REPORTS –

DATE: 7/25/75 TIME: ARRIVED 2:07 A.M. RETURNED 2:18 A.M.

NAME: ROUPEN ZEITOUNDJIAN AGE: 39

ADDRESS: 77 SACRAMENTO ST. ALARM BY: POLICE

SOMERVILLE, MASS.

LOCATION OF RESCUE MINERAL SPRING & CENTREDALE BY PASS

EXAMINATION

SKULL * SMALL LACERATION'S OVER LEFT EYE

EYES *

EARS *

NOSE * SMALL LACERATION UNDER NOSE

MOUTH *

CHEST *

ABDOMEN *

UPPER EXTREMITIES * CUT ON RIGHT THUMB AND ELBOW

LOWER EXTREMITIES *

POSITION OF PATIENT WHEN FOUND: STANDING OUTSIDE OF CAR

WAS PATIENT CONSCIOUS? YES

WAS PATIENT COOPERATIVE? (IF NOT EXPLAIN) PARTIALY, DID NOT WANT TO BE TRANSPORTED TO HE HOSPITAL AT FIRST

PATIENT TRANSPORTED TO: ROGER WILLIAMS GENERAL HOSPITAL BY RESCUE #1.

IF PATIENT WAS NOT TRANSPORTED EXPLAIN:

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

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

4"x4" GAUGE APPLIED UNDER NOSE
4"x4" GAUGE APPLIED ON THUMB
BAND AID APPLIED ON THUMB

SIGNED: Lt. B. Di Giulio OFFICER IN CHARGE: LT. E. PELLAND

RESCUE CO. NO. ENG.#1.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 313 N. P. File # 779

Date: 7/28/75
MONTH DAY YEAR

Time alarm received 9:30 A M Number of miles traveled 3

Time back in service ____ M

Time back at station 9:51 A M

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

Location of alarm: (Street and Number) 1363 SMITH ST.

Cause of fire LOCKOUT

Description of building or occupancy: HAMILTON HOUSE (APT.303)

Owner of building or occupancy: MR. & MRS. JOSEPH MATZNER

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	J. MOLLO	
	H. PARISI	
	J. NOTARANTONIO	

VEHICLE	STATION	ON SCENE
	LT. B. DI GIULIO	
	J. SLIVA	
	D. BAZZLE	
	W. DRAPER SR.	

REMARKS:

Lt B. di Giulio
SIGNED BY:

H. PARISI
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 314 N. P. File # 781

Date: 7/28/75 (MONTH / DAY / YEAR)

Time alarm received 404 P M Number of miles traveled 2

Time back in service ____ M

Time back at station 4:07 P M

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

Location of alarm: (Street and Number) 4 HOWE ST.

Cause of fire ____

Description of building or occupancy: ____

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. XXXXXXX	J. MOLLO	
LT. B. DI GIULIO	H. PARISI	
J. SLIVA	J. BOREK	
J. LANE		
VEHICLE	**STATION**	**ON SCENE**
CAPT. W. ROY	G. BULPITT SR.	
W. DRAPER SR.	J. ZIRDLI	
D. BAZZLE	D. FORTIN	
	M. MAGGIACOMO	
	R. HUGHES	
	J. PICCARDI	

REMARKS: CODE BLUE FROM ENG.#2.

Lt. B. Di Giulio

SIGNED BY:

LT. B. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 315 N. P. File # 785

Date: 7/29/75 (MONTH / DAY / YEAR)

Time alarm received 10:26 A M Number of miles traveled 1

Time back in service ____ M

Time back at station 10:34 A M

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

Location of alarm: (Street and Number) 226 CENTRAL AVE.

Cause of fire OPENING BURNING

Description of building or occupancy: ____

Owner of building or occupancy: FRED GREAVES

Owner's address: SAME

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) LEAVES		

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

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

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. B. DI GIULIO		
J. D'AMICO		
J. NOTARANTONIO		

VEHICLE	STATION	ON SCENE
	J. SLIVA	
	J. MOLLO	
	M. MAGGIACOMO	
	H. PARISI	
	W. DRAPER SR.	
	W. DRAPER JR.	

REMARKS: CODE YELLOW, OPENING BURNING (LEAVES)

Lt B. Di Giulio

SIGNED BY:

LT. B. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 316 N. P. File # 787

Date: 7/29/75
MONTH DAY YEAR

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

Time back in service ____ M

Time back at station 12:44 P M

Alarm received by: Box # 2351 Phone ____ Other ____ (Describe)

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

Cause of fire CODE BLUE

Description of building or occupancy: BIG G. MARKET

Owner of building or occupancy: ____

Owner's address: ____

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #3.4.1. Ladder(s) #2. Rescue(s) ____ Car: #1.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. B. DI GIULIO		
N. PHELAND		
D. BAZZLE		
J. BOREK		
M. MAGGIACOMO		
J. NOTARATONIO		
J. SLIWA		
VEHICLE	**STATION**	**ON SCENE**
	G. BULPITT SR.	
	P. TREMENTOZZI	
	J. MOLLO	
	E. BAZZLE	
	J. ZIROIL	
	H. PARISI	

REMARKS: CODE BLUE FROM ENG.#3.

Lt. B. Di Giulio
SIGNED BY:

LT. B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 317 N. P. File # 790

Date: 7/29/75 (MONTH / DAY / YEAR)

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

Time back in service ____ M

Time back at station 3:38 P M

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

Location of alarm: (Street and Number) 68 JACKSONA DR.

Cause of fire SHORT IN TV.

Description of building or occupancy: ____

Owner of building or occupancy: JANE GEORGE

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) TV.		

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #1, 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 #
LT. B. DI GIULIO	CAPT. W. ROY	
J. SLIVA	LT. E. PELLAND	
R. HUGHES	J. LANE	
J. NOTARANTONIO	M. MAGGIACOMO	
	J. MOLLO	
	D. BAZZLE	
	E. BAZZLE	
	H. PARISI	
VEHICLE	**STATION**	**ON SCENE**
W. DRAPER SR.	G. BULPITT SR.	
	D. FORTIN	
	J. BOREK	

REMARKS: CODE YELLOW,
SHORT IN TV.

Lt. B. Di Giulio
SIGNED BY:

LT. B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 318 N. P. File # 791

Date: 7/29/75
MONTH DAY YEAR

Time alarm received 9:22 P M Number of miles traveled 2

Time back in service 9:25 P M

Time back at station 9:27 P M

Alarm received by: Box # 421 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) ATLANTIC & SWAN

Cause of fire CODE BLUE

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF J. MURPHY	LT. E. PELLAND	
N. PHELAND	P. TREMENTOZZI	
M. MAGGIACOMO	W. DRAPER JR.	
P. LYONS	R. RATHIER	
J. LANE	A. CORISI	
D. FORTIN		
R. PARENTEAU		
R. HUGHES		

VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	LT. R. PAQUET	
	CAPT. W. ROY	
	T. PERNA	
	J. MOLLO	
	D. BAZZLE	
	M. MOONEY	
	W. DRAPER SR.	

REMARKS: CODE BLUE FROM ENG.#2.

Lt B. Di Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 319 N. P. File # 794

Date: 7/30/75
MONTH DAY YEAR

Time alarm received 12;40 A M Number of miles traveled 3

Time back in service ____ M

Time back at station 12;47 A M

Alarm received by: Box # 6233 Phone ____ Other ____ (Describe)

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

Cause of fire CODE BLUE

Description of building or occupancy: ST. MARY'S HOME

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

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

APPARATUS REPORT

Working time of pump: Hours: ____ minutes: ____

Defects on apparatus after alarm (if any): ____

Companies responding: ____

Engines(s) #2.1.3.6. Ladder(s) #1.2. Rescue(s) #1.2. Car: #21.

Other companies responding: ____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
N. PHELAND	CAPT. W. ROY	
P. LYONS	CAPT. P. RUGGIANO	
R. PARENTEAU	LT. E. PELLAND	
G. BULPITTSR.	P. TREMENTOZZI	
J. LANE	J. ZIROLI	
VEHICLE	**STATION**	**ON SCENE**
CHIEF J. MURPHY	LT. R. PAQUET	
J. PICCARDI	G. BULIPTT JR.	
	W. DRAPER JR.	

REMARKS: CODE BLUE FROM ENG.#2.

Lt. B. Di Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALDE Company Alarm # 320 N. P. File # 797

Date: 7/30/75
MONTH DAY YEAR

Time alarm received 6:45 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 XX Other (Describe)

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

Cause of fire CODE BLUE

Description of building or occupancy: WORCSTER TEXTILE 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		XX ☐ Miscellaneous alarm (describe)
☐ Miscellaneous fires (describe)		BOMB SCARE

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

APPARATUS REPORT

Working time of pump: Hours: minutes:

Defects on apparatus after alarm (if any):

Companies responding:

Engines(s) #1. Ladder(s) Rescue(s) Car: #2, 21

Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO		
J. LANE		
T. RUSSO		
E. BAZZLE		
J. ZIROLI		

VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	LT. E. PELLAND	
CHIEF J. MURPHY	N. PHELAND	
CAPT. W. ROY	G. BULPITT JR.	
C, HARRISON	P. TREMENTOZZI	
J. PICCARDI	R. HUGHES	
	J. BOREK	(STATION)
	D. FORTIN	T. PERNA
	M. MAGGIACOMO	D. BAZZLE
	H. DARBY	L. MARTINO
	J. MOLLO	P. PHILLIPS

REMARKS: CALL FROM POLICE DEPT. TO RESPOND TO WORCSTER TEXTILE CO., FOR A REPORT OF BOMB IN BUILDING. POLICE DEPT. CHECKED OUT BUILDING.

Lt. P. DiGiulio
SIGNED BY:

CAPT. P. RUGGIANIO
PERSON IN CHG.