

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 53 N. P. File # 130

Date: 3 1 75
MONTH DAY YEAR

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

Time back in service _____ M

Time back at station 4:00 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: JAMES CARDENTE

Owner's address: _____

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

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

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: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	D. BAZZIE	
LT W. ROY	P. TREMENTOZZI	
D. FORTIN	R. PARENTEAU	
M. DRAPER JR		
VEHICLE	STATION	ON SCENE
LT E. DI GIULIO	N. PHELAND	
F. BURSIE	T. RUSSO	
W. DRAPER SR	LT P. RUGGIANO	

REMARKS: CODE YELLOW FOR ENG 6 & LADDER 1

STOVE FIRE IN APT. FIRST FLOOR, SMOKE ON FIRST FLOOR & SECOND


SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CINTEGRIDALE Company Alarm # 54 N. P. File # 133

Date: 3 3 75
MONTH DAY YEAR

Time alarm received 4:22 p M Number of miles traveled 3

Time back in service _____ M

Time back at station 4:39 p M

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

Location of alarm: (Street and Number) 520 FRUIT HILL AVE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 2, 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 W. ROY W. ROY		
E. PELLAND		
J. MOLLO		
D. BAZZLE		
P. TREMENTOZZI		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
	CAPT C. SALISBURY	
	N. PHELAND	

REMARKS: OIL TANK RUPTURED IN CELLAR, WHILE OIL MAN WAS PUTTING
OIL IN TANK, WENT ALL OVER FLOOR.

A. Ernesto Scialo
SIGNED BY:

LT W. ROY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 55 N. P. File # 134

Date: 3 3 75
MONTH DAY YEAR

Time alarm received 8:15 P M Number of miles traveled 3

Time back in service _____ M

Time back at station 8:20 P M

Alarm received by: Box # 2213 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) 1810 MINERAL SP. AVE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT P. RUGGIANO	
	E. PEILLAND	
	D. FORTIN	
	D. BAZZLE	
	P. TREMENTOZZI	
	F. ROTELLA	
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT J. MURPHY	
	D. HOUDE	

REMARKS: CODE BLUE


SIGNED BY:

D. FORTIN
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 56 N. P. File # 140
 Date: 3 4 75
MONTH DAY YEAR

Time alarm received 3:32 P M Number of miles traveled 4
 Time back in service _____ M
 Time back at station 3:50 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)
 Location of alarm: (Street and Number) n N. ELMORE ST
 Cause of fire _____
 Description of building or occupancy: _____
 Owner of building or occupancy: _____
 Owner's address: _____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	100'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
1	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 #
CAPT SALISBURY		
LT ROY		
B. DI GIULIO		
J. MOLLO		
VEHICLE	STATION	ON SCENE
	LT E. DI GIULIO	
	N. PHELAND	
	D. BAZZLE	
	W. DRAPER SR	

REMARKS: LARGE AREA OF BRUSH, " CODE YELLOW

St. Emidio Giulio
SIGNED BY:

LT W. ROY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 57 N. P. File # 141

Date: 3 5 75
MONTH DAY YEAR

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

Time back in service 1:50 P M

Time back at station 1:54 P M

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

Location of alarm: (Street and Number) JACKSONIA DR

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED
Carbon Dioxide	<u>10'</u> Booster	Aerial
Dry Chemical	1½ Inch Hose	Over 35 Feet
Foam	2½ Inch Hose	Under 35 Feet
<u>4</u> 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: 10

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY		
LT E. DI GIULIO		
J. MOLLO		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
	CAPT C. SALISBURY	
	LT W. ROY	
	R. PAQUET	
	P. TREMENTOZZI	
	W. DRAPER SR	

REMARKS: LARGE AREA CALLED SS FOR ENG 6

A. Esposito
 SIGNED BY:

CAPT. J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 58 N. # 145
 Date: 3 6 75
MONTH DAY YEAR

Time alarm received 4:38 P M Number of miles traveled 4
 Time back in service _____ M
 Time back at station 4:44 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 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 #
N. PHELAND		
J. MOLLO		
T. RUSSO		
S. MARWELL (LYM.)		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO		
CAPT C. SALISBURY		
LT W. ROY		
LT P. RUGGIANO		

REMARKS: BRUSH , ALONG THE RIVER BANK, LITTLE LEAGUE FIELD.

E. Di Giulio

 SIGNED BY:

CAPT C. SALISBURY

 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 59 N. P. File # 147

Date: 3 MONTH 6 DAY 75 YEAR

Time alarm received 8:25 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 8:29 P M

Alarm received by: Box # 2213 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) MINERAL SP. AVE (N. PROV, ICE RINK)

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CAPT J. MURPHY	
	LT ROY	
VEHICLE	STATION	ON SCENE
	T. RUSSO	

REMARKS: CODE BLUE

St. Emili Lilio
SIGNED BY:

CAPT J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 60 N. P. File # 150

Date: 3 7 75
MONTH DAY YEAR

Time alarm received 10:21 PM Number of miles traveled 2

Time back in service _____ M

Time back at station 10:25 PM

Alarm received by: Box # 141 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) SMITH & FERNCLIFF AVE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

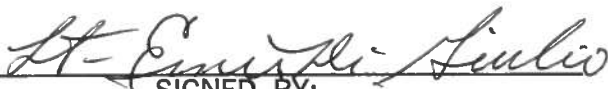
Engines(s) 1, 6 Ladder(s) 1 Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT MURPHY	
LT P. RUGGIANO	LT ROY	
E. PELLAND	T. PERNA	
D. FORTIN		
VEHICLE	STATION	ON SCENE
J. LANE		
A. CORSINI		
T. RUSSO		
F. ROTELLA		

REMARKS: CODE BLUE


 SIGNED BY:

CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 61 N. P. File # 152

Date: 3 8 75
MONTH DAY YEAR

Time alarm received 8:30 P M Number of miles traveled 11

Time back in service _____ M

Time back at station 8:37 P M

Alarm received by: Box # 154 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) CHANDLER AT CAROL ANN DR

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 1, 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 J. MURPHY	LT W. ROY	
D. FORTIN	N. PHELAND	
D.B AZZLE	J. MOLLO	
T. PERNA	A. CORSINI	
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO		

REMARKS: CODE BLUE


 SIGNED BY:

CAPT J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTRESDALE Company Alarm # 62 N. P. File # 153

Date: 3 8 75
MONTH DAY YEAR

Time alarm received 8:38 P M Number of miles traveled 11

Time back in service _____ M

Time back at station 9:05 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: FLORE H. BETRILLO

Owner's address: 1 RIVER VIEW DR N. PROV

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

EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED
Carbon Dioxide	<u>25'</u> Booster	Aerial
Dry Chemical	1½ Inch Hose	Over 35 Feet
Foam	2½ Inch Hose	Under 35 Feet
Pump Cans	3 Inch Hose	SALVAGE COVERS
Brooms	Other (Describe)	Number Used
Other (Describe)		Other Equipment
1 CROW BAR		
1 AXE		
ASBESTOS GLOVES		

APPARATUS REPORT

Working time of pump: Hours: 1 hr _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) _____ Ladder(s) _____ Rescue(s) _____ Car: 8 78

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY		
D. FORTIN		
D. BAZZLE		
T. PERNA		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	LT W. ROY	
	N. PHELAND	
	J. MOLLO	
	A. CORSINI	

REMARKS: CAR FIRE FULLY INVOLVED,
 !~~XXXX~~ 1969 VOLKSWAGON, BLUE FY 838
 FLORE H. BETRILLO
 1 RIVER VIEW DR N. PROV.

E. Di Giulio
 SIGNED BY:

CAPT J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 63 N. P. File # 161

Date: 3 10 75
MONTH DAY YEAR

Time alarm received 9:12 P M Number of miles traveled 3

Time back in service _____ M

Time back at station 9:27 P M

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

Location of alarm: (Street and Number) MINERAL SP. AVE (FISHER'S GARAGE)

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 5

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
T. RUSSO		
R. PARENTEAU		
J. MOLLO		
P. TREMENTOZZI		
C. HARRISON		
R. MARWELL		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	E. PELLAND	
CAPT J. MURPHY	D. FORTIN	
	N. PHELAND	
	F. BURSIE	
	D. BAZZLE	
	R. RATHIER	
J. MURPHY SR		
F. ROTELLA		

REMARKS: GAS SPILL PARKING LOT, WAS DOWN, ONLY


SIGNED BY:

J. MOLLO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 64 N. P. File # 164

Date: 3 11 75
MONTH DAY YEAR

Time alarm received 7:16 P M Number of miles traveled 4

Time back in service _____ M

Time back at station 7:18 P M

Alarm received by: Box # 417 Phone _____ Other _____ (Describe)

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

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: 7, 8 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 #
	E. PELLAND	
	J. MOLLO	
	D. BAZZLE	
	R. RATHIER	
VEHICLE	STATION	ON SCENE
CAPT J. MURPHY	T. RUSSO	
	R. PARENTEAU	
	H. DARBY	
	C. ZAHN	

REMARKS: CODE BLUE


SIGNED BY:

J. MOLLO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 65 N. P. File # 167

Date: 3 13 75
MONTH DAY YEAR

Time alarm received 11:16 A M Number of miles traveled 5

Time back in service 11:51 A M

Time back at station 11:53 A M

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

Location of alarm: (Street and Number) WATERMAN AVE (BROWN & SHEARPE)

Cause of fire NONE

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)		WORKING ON SYSTEM
		NO FIRE

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: 1, 3, 6

Engines(s) _____ 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 E. DI GIULIO	CAPT C. SALISBURY	
J. MOLLO	T. RUSSO	
B. DI GIULIO	R. PAQUET	
VEHICLE	STATION	ON SCENE
N. PHELAND	P. TREMENTOZZI	
T. PERNA		
LT W. ROY		
F. ROTELLA		
W. DRAPER		

REMARKS: CODE BLUE, ACCIDENTAL ALARM CALL CAME IN FROM
 R.I. PROTECTIVE FOR BROWN & SHARPE, CHECKED B& S FOUND NOTHING
 CHECKED WORSTER TEXTILE FOUND WATER FLOW LOW ON LINE, NOTHING IN
 MILL, TROUBLE WAS AT INDUSTRIAL PLATEING. MEN WERE WORKING ON
 SYSTEM.


 SIGNED BY:
 B. DI GIULIO (LT W. ROY)
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 66 N. P. File # 170

Date: 3/14/74
MONTH DAY YEAR

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

Time back in service _____ M

Time back at station 1:42 P M

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

Location of alarm: (Street and Number) 1904 SMITH ST.

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 ☐ Fire in dwelling ☐ Fire in brush or grass ☐ Fire in rubbish ☐ Fire in dump ☐ Fire in vehicle ☐ Miscellaneous fires (describe)	☐ Code Red ☐ Code Yellow ☐ Code Blue	☐ Rescue or emergency ☐ Water emergency ☐ Lockout ☐ Accidental alarms ☐ False alarm ☒ Miscellaneous alarm (describe) <u>LOCKOUT</u>

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CAPT. C. SALISBURY	
	B. DI GIULIO	
	J. MOLLO	
VEHICLE	STATION	ON SCENE
	LT. E. DI GIULIO	
	LT. W. ROY	
	N. PHELAND	
	D. BAZZLE	
	A. CORSINI	
	W. DRAPER	

**REMARKS: HAD TO BREAK A SMALL WINDOW TO GAIN ENTRANCE. WENT IN
THROUGH CELLAR WINDOW.**

B. Di Giulio
SIGNED BY:

B. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 67 N. P. File # 171

Date: 3/14/75
MONTH DAY YEAR

Time alarm received 9:43 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 9:48 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #7, 1. Ladder(s) #1. Rescue(s) #4, 2 Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
CHIEF K. CHILLE (LYM.)	LT. P. RUGGIANO	
D. FORTIN	E. PELLAND	
T. PERNA	P. TREMENETOZZI	
	C. HARRISION	
	EXXERTIN	
	F. ROTELLA	
VEHICLE	STATION	ON SCENE
	LT. E. ROY	
	A. CORSINI	

REMARKS: CODE BLUE FROM ENG.#7.


SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 68 N. P. File # 173

Date: 3/15/75
MONTH DAY YEAR

Time alarm received 11:42 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 11:49 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

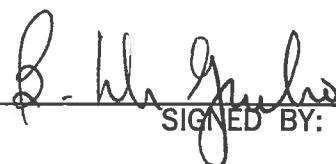
Engines(s) 1,6. Ladder(s) #1. Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. W. ROY		
D. BAZZLE		
P. TREMENETOZZI		
VEHICLE	STATION	ON SCENE
	D. FORTIN	
	C. HARRISION	
	A. CORSINI	

REMARKS: CODE BLUE.



 SIGNED BY:

 D. BAZZLE

 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 69 N. P. File # 174

Date: 3/16/75
MONTH DAY YEAR

Time alarm received 1:49 A M Number of miles traveled 0

Time back in service _____ M

Time back at station 1:57 A M

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

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

Cause of fire SET

Description of building or occupancy: POLICE & FIRE COMP.

Owner of building or occupancy: TOWN OF NORTH PROVIDENCE

Owner's address: 2008 SMITH ST.

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #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 #
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT. C. SALISBURY	
	LT. W. ROY	
	LT. P. RUGGIANO	
	D. FORTIN	
	J. LANE	
	B. DI GIULIO	
	P. TREMENETOZZI	
	F. ROTELLA	

REMARKS: PRISONER SET FIRE TO BLANKET IN CELL BLOCK AREA.

FIRE OUT ON ARRIVAL.

TRUCKS DID NOT LEAVE STATION.


SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 70 N. P. File # 177

Date: 3/17/75
MONTH DAY YEAR

Time alarm received 7:01 P M Number of miles traveled 3

Time back in service 7:06 P M

Time back at station 7:07 P M

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

Location of alarm: (Street and Number) 242 WATERMAN AVE. (APT. 21)

Cause of fire COOKING

Description of building or occupancy: MARGET GIBLIN

Owner of building or occupancy: _____

Owner's address: _____

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

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

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: #78.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
D. FORTIN		
J. MOLLO		
D. BAZZLE		
D. HOUDE		
P. TREMENETOZZI		
A. CORSINI		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
LT. P. RUGGIANO	E. PELLAND	
C. HARRISION	F. BURSIE	

REMARKS: STOVE FIRE, OUT ON ARRIVAL.

E. Di Giulio

SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 71 N. P. File # 180

Date: 3 18 75
MONTH DAY YEAR

Time alarm received 3:30 P M Number of miles traveled 10

Time back in service _____ M

Time back at station 4:14 P M

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

Location of alarm: (Street and Number) ADAMS ST

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	400'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
1	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: 1 hr 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 W. ROY		
J. LIA NE		
J. MOLLO		
P. TREMENTOZZI		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
D. BAZZLE	CAPT C. SALISBURY	
	LT E. DI GIULIO	
	A. CORSINI	

REMARKS: LARGE AREA, LET IT BURN.


SIGNED BY:

LT W. ROY

PERSON IN CHG.

Primary Fire District Report

Owner's address: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
B. DI GIULIO	LT E. DI GIULIO	
J. BOREK	P. TREMENTOZZI	
J. MOLLO		
VEHICLE	STATION	ON SCENE
W. DRAPER SR		

REMARKS: MEN WORKING ON SYSTEM, SET OFF ACCIDENTAL


 SIGNED BY:

J. MOLLO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 73 N. P. File # 183

Date: 3 19 75
MONTH DAY YEAR

Time alarm received 5:56 PM Number of miles traveled 15

Time back in service _____M

Time back at station 6:35 PM

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

Location of alarm: (Street and Number) 50, BROOKSIDE

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	150'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: 1 hr minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO		
CAPT J. MURPHY		
LT W. ROY		
LT P. RUGGIANO		
E. PELLAND		
P. TREMENTOZZI		
VEHICLE	STATION	ON SCENE
F. BURSIE		
D. BAZZLE		
W. DRAPER JR		
C. HARRISON		
H. DARBY		
W. DRAPER SR		

REMARKS: VACANT LOT, LET IT BURN OFF.


SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 74 N. P. File # 185

Date: 3/20/75
MONTH DAY YEAR

Time alarm received 8:20 P M Number of miles traveled 2

Time back in service 8:23 P M

Time back at station 8:23 P M

Alarm received by: Box # 427 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) SMITH & 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) #2,1. Ladder(s) #1. Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY		
LT. W. ROY		
D. BAZZLE		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	J. BOREK	

REMARKS: CODE BLUE FROM ENG.#2.
 LADDER DID NOT LEAVE STATION.


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

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 75 N. P. File # 188
 Date: 3/21/75
MONTH DAY YEAR

Time alarm received 4:31 P M Number of miles traveled 3
 Time back in service _____ M
 Time back at station 4:58 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED
Carbon Dioxide	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: 5

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #1. SS ENG. #6. Rescue(s) _____ Car: #78

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. C. SALISBURY		
E. PELLAND		
B. DI GIULIO		
J. MOLLO		
P. TREMENTOZZI		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	LT. W. ROY	
LT. E. DI GIULIO	T. RUSSO	
H. DARBY		

REMARKS: 500' IN OFF LOCUST AVE. LARGE AREA OF BRUSH.

4:58 P.M. S.S. ENG.#6.

B. Di Giulio

SIGNED BY:

CAPT. C. SALISBURY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 76 N. P. File # 190

Date: 3/21/75
MONTH DAY YEAR

Time alarm received 11:09 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 11:14 P M

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

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

Cause of fire CODE BLUE

Description of building or occupancy: GREYSTONE SCHOOL

Owner of building or occupancy: TOWN OF NORTH PROVIDENCE

Owner's address: 2008 SMITH ST.

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. J. MURPHY	LT. W. ROY	
LT. P. RUGGIANO	N. PHELAND	
T. PERNA	P. TREMENTOZZI	
	C. HARRISON	
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	J. LANE	

REMARKS: CODE BLUE


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

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 77 N. P. File # 200

Date: 3/23/75
MONTH DAY YEAR

Time alarm received 6:11 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 6:15 P M

Alarm received by: Box # 243 Phone _____ Other _____ (Describe)

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	CHIEF E. DI GIULIO	
	T. RUSSO	
	R. RATHIER	
	W. DRAPER JR.	
	P. TREMENTOZZI	
	A. CORSINI	
VEHICLE	STATION	ON SCENE
LT. E. ROY	CAPT. J. MURPHY	
D. FORTIN	T. PERNA	
N. PHELAND	F. BURSI	

REMARKS: CODE YELLOW FROM ENG. 3.

WRONG N. P. FILE NUMBER GIVEN BY F.A. (KEEP SAME)


SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 78 N. P. File # 193

Date: 3/24/75
MONTH DAY YEAR

Time alarm received 8:55 A M Number of miles traveled 1

Time back in service _____ M

Time back at station 9:05 A M

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

Location of alarm: (Street and Number) 62 HOBSON AVE.

Cause of fire SHORT IN WIRES FROM BATTERY CABLE

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

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

REMARKS: CAR FIRE, SHORT IN WIRING AT BATTERY. OUT ON ARRIVAL.

OWNER:		
GARY RUZZIO	69 CUSTOM FORD	
1 DRAPER RD.	R.I. PY230	NO. INS.
LINCOLN, R.I.		


 SIGNED BY:
 B. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # ~~194~~ 79 N. P. File # 194

Date: 3/24/75
MONTH DAY YEAR

Time alarm received 1:06 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 1:12 P M

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

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

Cause of fire _____

Description of building or occupancy: ST. PATRICK HIGH SCHOOL

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. C. SALISBURY		
LT. E. DI GIULIO		
N. PHELAND		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
LT. W. ROY	J. MOLLO	
W. DRAPER		
F. ROTELLA		

REMARKS: CALL CAME IN FOR A FIRE IN THE LIBRARY, CHECK AREA FOUND
 NOTHING.


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

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 80 N. P. File # 195

Date: 3/24/75
MONTH DAY YEAR

Time alarm received 7:16 P M Number of miles traveled 1

Time back in service M

Time back at station 7:20 P M

Alarm received by: Box # 146 Phone Other (Describe)

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

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)		<u> </u>

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

APPARATUS REPORT

Working time of pump: Hours: minutes:

Defects on apparatus after alarm (if any):

Companies responding:

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

Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	LT. W. ROY	
N. PHELAND	W. DRAPER JR.	
D. BAZZLE	P. TREMENTOZZI	
D. HOUDE	S. MARWELL (LYM.)	
A. CORSINI		
VEHICLE	STATION	ON SCENE
CAPT. J. MURPHY	C. HARRISON	
F. ROTELLA		
W. DRAPER SR.		

REMARKS: CODE BLUE,

B. Di Giulio
SIGNED BY:

D. BAZZLE
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 81 N. P. File # 196

Date: 3/25/75
MONTH DAY YEAR

Time alarm received 2:41 P M Number of miles traveled 3

Time back in service 3:23 P M

Time back at station 3:30 P M

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

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

Cause of fire DETAIL

Description of building or occupancy: WOOSTER TEXTILE

Owner of building or occupancy: SAME

Owner's address: _____

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

EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED
Carbon Dioxide	Booster	Aerial
Dry Chemical	1½ Inch Hose	Over 35 Feet
Foam	2½ Inch Hose	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: #1.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT. W. ROY	
	B. DI GIULIO	
	J. MOLLO	
	A. CORSINI	
VEHICLE	STATION	ON SCENE
W. DRAPER SR.	CAPT. C. SALISBURY	
	LT. E. DI GIULIO	
	N. PHELAND	

REMARKS: CALLED TO CHECK C.D. SIREN ON ROOF. FOUND THAT COVER BLEW OFF.


 SIGNED BY:

LT. W. ROY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 82 N. P. File # 197

Date: 3/25/75
MONTH DAY YEAR

Time alarm received 6:15 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 6:19 P M

Alarm received by: Box # 4232 Phone _____ Other _____ (Describe)

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

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)		
	Other (Describe)				Number Used
					Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) #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 #
	LT. P. RUGGIANO	
	N. PHELAND	
	P. TREMENTOZZI	
VEHICLE	STATION	ON SCENE
	CAPT. J. MURPHY	
	T. PERNA	
	D. BAZZLE	
	R. RATHIER	

REMARKS: CODE BLUE FROM ENG.#2.


SIGNED BY:

N. PHELAND

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 83 N. P. File # 198
 Date: 3/25/75
MONTH DAY YEAR
 Time alarm received 9:42 P M Number of miles traveled 2
 Time back in service 9:49 P M
 Time back at station 9:53 P M
 Alarm received by: Box # 6122 Phone 100 MORGAN AVE. Other _____ (Describe)
 Location of alarm: (Street and Number) _____
 Cause of fire CODE BLUE
 Description of building or occupancy: GREYSTONESCHOOL
 Owner of building or occupancy: TOWN OF NORTH PROVIDENCE
 Owner's address: 2008 SMITH ST.

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

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

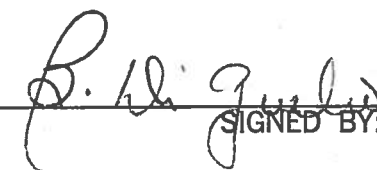
APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____
 Defects on apparatus after alarm (if any): _____
 Companies responding: #1.
 Engines(s) _____ Ladder(s) _____ Rescue(s) _____ Car: _____
 Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. W. ROY		
D. FORTIN		
T. PERNA		
D. BAZZLE		
R. RATHIER		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT. J. MURPHY	
	N. PHELAND	
	F. BURSIE	
	C. HARRISON	

REMARKS: CODE BLUE.


 SIGNED BY:
 LT. W. ROY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 84 N. P. File # 199

Date: 3/25/75
MONTH DAY YEAR

Time alarm received 11:02 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 11:11 P M

Alarm received by: Box # 4233 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) SMITH ST

Cause of fire _____

Description of building or occupancy: RONCI MANUFACTURING

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	CAPT. J. MURPHY	
D. FORTIN	LT. W. ROY	
N. PHELAND	D. BAZZLE	
T. PERNA	R. RATHIER	
	P. TREMENTOZZI	
VEHICLE	STATION	ON SCENE
	LT. P. RUGGIANO	
	C. HARRISON	

REMARKS: CODE YELLOW FROM ENG.#2.

TYPE OF FIRE UNKNOWN.


SIGNED BY:

CHIEF E. DI GIULIO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 85 N. P. File # 203

Date: 3 26 75
MONTH DAY YEAR

Time alarm received 5:10 P M Number of miles traveled 18

Time back in service _____ M

Time back at station 6:13 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: BARGAMIAN

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	200'	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: 1hr. minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	LT W. RPY	
CAPT J. MURPHY	D. BAZZLE	
N. PHELAND	D. HOUDE	
J. LANE	T. RUSSO	
T. PERNA		
VEHICLE	STATION	ON SCENE
LT E. DI GIULIO		
LT P. REGGIANO		
CAPT C. SALISBURY		
J. MOLLO		
W. DRAPER JR		
H. DARB Y		
R. PARENTEAU		
W. DRAPER SR		

REMARKS: CODE RED, TWO STORY WOOD FRAME. VACANT
 BARGAMIANS JUNK YARD. ENG 1 PUMPED FROM HYD. TO ENG 3



 SIGNED BY:

 CHIEF E. DI GIULIO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 86 N. P. File # 205

Date: 3 27 75
MONTH DAY YEAR

Time alarm received 4:09 PM Number of miles traveled 2

Time back in service _____ M

Time back at station 4:24 PM

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

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

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)		FLOW IN WATER SYSTEM

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: 1, 2, 4

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT C. SALISBURY	LT E. DI GIULIO	
LT W. ROY	D. BAZZLE	
N. PHELAND	J. MOLLO	
J. LANE		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
W. DRAPER JR		
W. DRAPER SR		

REMARKS: FLOW IN WATER SYSTEM,

St. Emmerich Giulio

SIGNED BY:

LT W. ROY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 87 N. P. File # 208
 Date: 3 28 75
MONTH DAY YEAR

Time alarm received 1:16 P M Number of miles traveled 7
 Time back in service _____ M
 Time back at station 1:44 P M

Alarm received by: Box # _____ Phone XX Other _____ (Describe)
 Location of alarm: (Street and Number) 46 HOBSON AVE
 Cause of fire _____
 Description of building or occupancy: _____
 Owner of building or occupancy: _____
 Owner's address: _____

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	200'	Booster		Aerial
	Dry Chemical		1½ Inch Hose		Over 35 Feet
	Foam		2½ Inch Hose		Under 35 Feet
2	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)				Other Equipment

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: 15
 Defects on apparatus after alarm (if any): _____
 Companies responding: _____
 Engines(s) 1 Ladder(s) _____ Rescue(s) _____ Car: _____
 Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT C. SALISBURY		
LT E. DI GIULIO		
LT P. RUGGIANO		
D. BAZZLR		
B. DI GIULIO		
VEHICLE	STATION	ON SCENE
	LT W. ROY	
	A. CORSINI	
	J. MOLLO	

REMARKS: BRUSH IN WOODS, CODE YELLOW

St. Emilio Di Giulio

SIGNED BY: _____

LT E. DI GIULIO

PERSON IN CHG. _____

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 88 N. P. File # 210

Date: 3 28 75
MONTH DAY YEAR

Time alarm received 2:54 P M Number of miles traveled 15

Time back in service _____ M

Time back at station 4:29 P M

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

Location of alarm: (Street and Number) ATWOOD AVE (JOHNSTON FIRE HQ, MUTUAL AID)

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
3	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: _____

[illegible]

BRUSH FIRE AT BROWN & INDIAN VALLEY, FIRE WAS IN THE REAR	
OF 3 INDIAN VALLEY. IN WOODS .	TIME OUT 3:45 pm
	IN SERV. 4:05 pm
	TIME IN . 4:15 pm

LT. E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 89 N. P. File # 213

Date: 3 28 75
MONTH DAY YEAR

Time alarm received 6:38 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 6:42 P M

Alarm received by: Box # 427 Phone _____ Other _____ (Describe)

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF E. DI GIULIO	LT W. ROY	
D. FORTIN	LT P RUGGIANO	
P.TREMENTOZZI	H. DARBY	
T. PERNA	T. RUSSO	
VEHICLE	STATION	ON SCENE

REMARKS: CODE BLUE

E. Di Giulio
SIGNED BY:

CHIEF E, DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 90 N. P. File # 216

Date: 3 30 75
MONTH DAY YEAR

Time alarm received 12:51 A M Number of miles traveled 2

Time back in service _____ M

Time back at station 1:01 A M

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

Location of alarm: (Street and Number) 1963 SMITH ST

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED
Carbon Dioxide	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: 7 8

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT J. MURPHY		
LT W. ROY		
N. PHELAND		
R. RATHIER		
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	LT P. RUGGIANO	
	D. FORTIN	
	J. MOLLO	
	D. HOUDE	
	P. TERMENTOZZI	

REMARKS: CODE BLUE. RESIDENT ASKED FOR POLICE DUE TO HIS BEING
HARASSED, BY SOMEONE ALL DAY LONG.
ANONYMOUS CALL TO TEL. OPERATOR FOR FIRE APP.

E. Di Giulio
SIGNED BY:

CHIEF E. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 91 N. P. File # 219

Date: 3 31 75
MONTH DAY YEAR

Time alarm received 4:07 P M Number of miles traveled 1

Time back in service 4:26 P M

Time back at station 4:28 P M

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

Location of alarm: (Street and Number) LOCUST AVE

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED
Carbon Dioxide	Booster	Aerial
Dry Chemical	1½ Inch Hose	Over 35 Feet
Foam	2½ Inch Hose	Under 35 Feet
3 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: 78

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT E. DI GIULIO		
LT W. ROY		
E. PELLAND		
N. PHELAND		
J. MOLLO		
D. BAZZLE		
VEHICLE	STATION	ON SCENE
	CAPT C. SALISBURY	
	B. DI GIULIO	
	R. PAQUET	
	A. CORSINI	

REMARKS: BRUSH IN FIELD. CODE YELLOW


SIGNED BY:

LT W. ROY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 92 N. P. File # 221

Date: 3 MONTH 31 DAY 75 YEAR

Time alarm received 8:17 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 8:20 P M

Alarm received by: Box # 427 Phone _____ Other _____ (Describe)

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

Engines(s) 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 E. DI GIULIO	LT P. RUGGIANO	
CAPT J. MURPHY	D. RAZZLE	
D. HOUDE	R. RATHIER	
W. DRAPER JR	P. TREMENTOZZI	
A. CORSINI	G. BULPITT	
	R. PARENTEAU	
VEHICLE	STATION	ON SCENE
	F. ROTELLA	

REMARKS: CODE BLUE

E. Di Giulio
 SIGNED BY:

CAPT J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 93 N. P. File # 222

Date: 3 31 75
MONTH DAY YEAR

Time alarm received 9:26 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 9:28 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT P. RUGGIANO	
	D. BAZZLE	
	R. RATHIER	
	D. HOUDE	
	P. TREMENTOZZI	
	A. CORSINI	
	T. RUSSO	
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	CAPT J. MURPHY	
	R. PARENTEAU	
	G. BULPITT	
	C. HARRISON	
	F. ROTELLA	

REMARKS: BRUSH, CODE YELLOW ENG. 2

D. Bazzle

 SIGNED BY:

D. BAZZLE

 PERSON IN CHG.