

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 427 N. P. File # 1087

Date: 11/1/75
MONTH DAY YEAR

Time alarm received 1:36 A M Number of miles traveled 11

Time back in service M

Time back at station 2:14 A M

Alarm received by: Box # 412 Phone Other (Describe)

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

Cause of fire

Description of building or occupancy:

Owner of building or occupancy:

Owner's address:

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

EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED
Carbon Dioxide	2/1 50' Booster 1"	Aerial
Dry Chemical	1 1/2 Inch Hose	Over 35 Feet
Foam	2 1/2 Inch Hose	Under 35 Feet
Pump Cans	3 Inch Hose	SALVAGE COVERS
Brooms	Other (Describe)	Number Used
Other (Describe)		Other Equipment
		1 PIKE POLE
		1 HANDLIGHT

APPARATUS REPORT

Working time of pump: Hours: minutes: 25

Defects on apparatus after alarm (if any):

Companies responding: #2, 1, 6. Ladder(s) #1. Rescue(s) Car: #21.

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

Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO	J. LANE	
J. MOLLO	D. LANE	
E. BAZZLE	J. BOREK	
R. HUGHES	G. BULPITT JR.	
D. BAZZLE		
J. ZIROLI		
P. LYONS		
VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY		

REMARKS: DUMPSTER IN BACK OF DEBELLIS PHARMACY, ~~184~~ 1848 SMITH ST.

CODE YELLOW FOR ENG.#1.

Ch. J. Murphy
SIGNED BY:

CHIEF J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 428 N. P. File # 1092

Date: 11/2/75
MONTH DAY YEAR

Time alarm received 2:48 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 2:50 P M

Alarm received by: Box # 2212 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) WENTWORTH 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) #3, 4, 5 Ladder(s) #1, 2 Rescue(s) #3 Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
E. SPAZIANO	D. BAZZLE	
J. ZIROLI	M. MAGGIACOMO	
N. FHELAND		
J. BOREK		
R. RATHIER		
VEHICLE	STATION	ON SCENE
	LT. R. PAQUET	
	W. ROY	
	A. CORSINI	
	M. MOONEY	
	R. HUGHES	
	S. COPPA	
	G. BULPITT JR.	

REMARKS: CODE YELLOW FOR ENG.#3.

Lt. J. M. Gaudin
 SIGNED BY:

M. MAGGIACOMO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 429 N. P. File # 1093

Date: 11/2/75
MONTH DAY YEAR

Time alarm received 6:44 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 6:49 P M

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

Location of alarm: (Street and Number) SWAN 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	☒ 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: _____

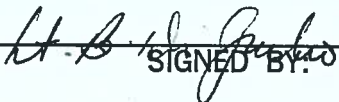
Engines(s) #2,1. Ladder(s) #1. Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
D. BAZZLE	J. BOREK	
M. MAGGIACOMO	E. SRAZIANO	
J. ZIROLI	G. BULPITT JR.	
D. HOUDE		
VEHICLE	STATION	ON SCENE
	LT. R. PAQUET	
	A. CORSINI	
	M. MOONEY	
	R. HUGHES	
	P. LYONS	
	T. PERNA	

REMARKS: CODE BLUE FROM ENG.2.


 SIGNED BY:

D. HOUDE
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 430 N. P. File # 1095

Date: 11/3/75
MONTH DAY YEAR

Time alarm received 8:41 P M Number of miles traveled 5

Time back in service _____ M

Time back at station 6:53 P M

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

Location of alarm: (Street and Number) OPPOSITE 25 CRAGIE ST.

Cause of fire SET

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building ☐ Fire in dwelling ☐ Fire in brush or grass ☐ Fire in rubbish ☐ Fire in dump ☐ Fire in vehicle ☒ Miscellaneous fires (describe) <u>LEAVES</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	508'	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
				1	PIKE POLE

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 #
J. BOREK		
S. COPPA		
M. RUSSO		
P. LYONS		
CAPT. E. PELLAND		
J. ZIROLI		
VEHICLE	STATION	ON SCENE
N. PHELAND	CHIEF E. DI GIULIO	
	G. BULPITT JR.	
	R. RATHIER	
	T. RUSSO	
	P. TREMENTOZZI	
	W. DRAPER JR.	
	W. ROY	

REMARKS: LEAVES IN STORM DRAIN BURNING.

E. Di Giulio
 SIGNED BY:

CAPT. E. PELLAND
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 431 N. P. File # 1100

Date: 11/4/75
MONTH DAY YEAR

Time alarm received 7:52 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 7:56 P M

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

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF J. MURPHY		
W. DRAPER JR.		
P. TREMENTOZZI		
L. TORO		
F. CHARTIER		
R. HUGHES		
D. BAZZLE		
VEHICLE	STATION	ON SCENE
R. PARENTEAU	LT. H. DARBY	
	N. PHELAND	
	G. BULPITT	
	LT. R. PAQUET	
	CAPT. E. PELLAND	
	C. HARRISION	

REMARKS: CODE BLUE FROM ENG.#1.


 SIGNED BY:
 CHIEF J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 432 N. P. File # 1101

Date: 11/5/75
MONTH DAY YEAR

Time alarm received 2:50 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 3:00 P M

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

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

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: #21.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
C. SALISBURY		
H. PARISI		
N. PHELAND		
R. HUGHES		
J. ZIROLI		
VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY	J. MOLLO	
	A. CACCIA	
	M. LABBADIA	
	L. CALISI	
	CAPT. E. PELLAND	
	S. COPPA	
	W. DRAPER SR.	

REMARKS: OPEN BURNING, LEAVES AND BRUSH.

H. Parisi
 SIGNED BY:

H. PARISI
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 433 N. P. File # 1111

Date: 11/6/75
MONTH DAY YEAR

Time alarm received 2:14 P M Number of miles traveled 7

Time back in service _____ M

Time back at station 2:39 P M

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

Location of alarm: (Street and Number) 17 WOODHAVEN BLVD.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED
Carbon Dioxide	<u>150'</u> Booster <u>1"</u>	Aerial
Dry Chemical		Over 35 Feet
Foam		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 #
C. SALISBURY		
H. PARISI		
VEHICLE	STATION	ON SCENE
S. COPPA	J. MODLO	
	A. CACCIA	
	M. LABBADIA	
	L. CALISI	

REMARKS: CODE YELLOW


 SIGNED BY:
H. PARISI
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 434 N. P. File # 1118

Date: 11/7/75
MONTH DAY YEAR

Time alarm received 8:06 PM Number of miles traveled 5

Time back in service _____ M

Time back at station 8:10 PM

Alarm received by: Box # 428 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) LINWOOD & BURNSIDE

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) #2,3 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	
	S. COPPA	
	J. ZIROLI	
	R. HUGHES	
	E. SPAZIANO	
VEHICLE	STATION	ON SCENE
	CAPT. E. PELLAND	
	T. RUSSO	
	R. RATHIER	
	M. RUSSO	
	G. BULPITT JR.	
	J. SHIPPEE	
	K. CICERONE	
	W. DRAPER JR.	
	C. HARRISON	

REMARKS: CODE BLUE.


 SIGNED BY: _____
 S. COPPA
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 435 N. P. File # 1122
 Date: 11/8/75
MONTH DAY YEAR

Time alarm received 1:21 A M Number of miles traveled 19
 Time back in service M
 Time back at station 2:34 A M

Alarm received by: Box # 144 Phone Other (Describe)
 Location of alarm: (Street and Number) 2034 -2038 SMITH ST, SMITH & WATERMAN
 Cause of fire
 Description of building or occupancy:
 Owner of building or company: XXXXXXXX AARON BORROWS
 Owner's address:

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

EXTINGUISHMENT USED		TYPE & FEET HOSE LINES USED		LADDERS USED	
	Carbon Dioxide	100'	Booster 1"		Aerial
	Dry Chemical		1½ Inch Hose	1/35'	Over 35 Feet
	Foam	150'	2½ Inch Hose	1/14'	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)	4	HANDLIGHTS		Other Equipment
			GENERATOR 20min.	1	HANIGAN TOOL
		1	500 WATT LIGHT	2	SMOKE IJECTORS
					ELEC. CORDS

APPARATUS REPORT

Working time of pump: Hours: 1 minutes:
 Defects on apparatus after alarm (if any):
 Companies responding:
 Engines(s) #1,3,6. Ladder(s) #1. Rescue(s) Car: #1,2,21.
 Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. E. PELLAND	J. BOREK	
T. RUSSO	S. COPPA	
R. RATHIER	P. LYONS	
M. RUSSO		
G. BULPITT JR.		
J. ZIROLI		
VEHICLE	EXTENSION	ON SCENE
DEP. CHIEF E. DI GIULIO		
CHIEF J. MURPHY		
LT. H. DARBY		
CHIEF R. CHARELLO		
W. DRAPER JR.		
J. MOLLO		
F. CHARTIER		
T. PERNA		
J. PICCARDI	W. DRAPER SR.	
J. LANE	F. ROTELLA	

R. PARENTEAU

REMARKS: FIRE IN PILE OF DEBRIS IN CELLAR, DAMAGE LIGHT TO BLDG.
SOME SMOKE THROU OUT.

2034 SMITH ST.	2036 SMITH ST.
MIKES BARBER SHOP	MODERN SHOE REBUILDING
MIKE CAMBIO- OCCUPANT	ELVIRA BARONE -- OCCUPANT
	23 BEACH ST., NO. PROV. R.I.

2038 SMITH ST.
D&D JEWELRY
NORMAN, & ALBERT DUPRE-- OCCUPANT
11 GARDER, GREENVILLE, R.I.
INS. CO. FOR. BILDG.
E.A. IONS
BLDG. INS. \$15,000

[Signature]
SIGNED BY:
[Signature]
PERSON IN CHG.

Secondary Fire District Report

Date: 11/8/75
MONTH DAY YEAR

Time back at station 2:22 AM

Cause of fire CODE BLUE

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 #
	J. BOREK	
	S. COPPA	
	P. LYONS	
	W. DRAPER SR.	
VEHICLE	STATION	(STATION ON SCENE)
	CHIEF R. CHARELLO	J. MOLLO
	CHIEF E. DI GIULIO	J. LANE
	CHIEF J. MURPHY	J. ZIROLI
	CAPT. E. PELLAND	J. PICCARDI
	T. RUSSO	T. PERNA
	R. RATHIER	R. PARENTEAU
	M. RUSSO	W. DRAPER JR.
	G. BULPITT	F. ROTELLA
	LT. H. DARBY	
	F. CHARTIER	

REMARKS: CODE BLUE FROM ENG.#5.

St. B. di Giulio
 SIGNED BY: _____

S. COPPA
 PERSON IN CHG. _____

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 437 N. P. File # 1126

Date: 11/8/75
MONTH DAY YEAR

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

Time back in service _____ M

Time back at station 2:19 P M

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

Location of alarm: (Street and Number) OLNEY & 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	☒ 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 #
E. BAZZLE	CAPT. R. RUGGIANO	
R. HUGHES	J. MODLO	
J. ZIROLI	D. LANE	
CAPT. E. PELLAND	P. LYONS	
	G. BULPITT JR.	
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	J. LANE	
	G. KENNAWAY	
	M. MAGGIACOMO	

REMARKS: CODE BLUE FROM ENG.#2.

H. B. di Giulio
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 438 N. P. File # 1129

Date: 11/8/75
MONTH DAY YEAR

Time alarm received 10.17 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 10.20 P M

Alarm received by: Box # 133 Phone _____ Other _____ (Describe)

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

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: _____

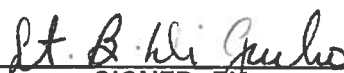
Engines(s) #1, 2 Ladder(s) #1 Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO		
R. HUGHES		
J. ZIROLI		
E. BAZZLE		
S. COPPA		
J. MOLLO		
P. LYONS		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	J. LANE	
	D. LANE	
	G. BULPITT JR.	
	W. ROY	
	R. RATHIER	

REMARKS: CODE BLUE FROM ENG.1.


 SIGNED BY:
 CAPT. P. RUGGIANO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 439 N. P. File # 1130

Date: 11/8/75
MONTH DAY YEAR

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

Time back in service M

Time back at station 10:36 P M

Alarm received by: Box # 133 Phone Other (Describe)

Location of alarm: (Street and Number) MIERAL SPRING & PENSUKKE

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>
<u> </u>		<u> </u>

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

APPARATUS REPORT

Working time of pump: Hours: minutes:

Defects on apparatus after alarm (if any):

Companies responding:

Engines(s) #1, 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 #
J. MOLLO	J. LANE	
R. HUGHES	D. LANE	
J. ZIROLI	G. BULPITT JR.	
E. BAZZLE	R. RATHIER	
P. LYONS	W. ROY	
S. COPPA		
VEHICLE	STATION	ON SCENE
G. KENNAWAY	CHIEF E. DI GIULIO	

REMARKS: CODE BLUE FROM ENG.#1.

E. Di Giulio
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 440 N. P. File # 1132

Date: 11/9/75
MONTH DAY YEAR

Time alarm received 9:03 AM Number of miles traveled 1

Time back in service _____ M

Time back at station 9:12 AM

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: _____

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: #21.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO		
G. KENNAWAY		
R. HUGHES		
E. BAZZLE		
J. MOLLO		
J. ZIROLI		
VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY	D. LANE	
W. ROY	J. LANE	
	P. TREMENTOZZI	
	P. LYONS	

REMARKS: REPORT OF SMOKE IN AREA.

CODE BLUE FROM ENG.#1.

Pt. B. W. Giulio
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 441 N. P. File # 1136

Date: 11/10/75
MONTH DAY YEAR

Time alarm received 9:10 A M Number of miles traveled 13

Time back in service _____ M

Time back at station 9:19 A M

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

Location of alarm: (Street and Number) 120 WATERMAN AVE. (BROWN & SHARPE GATE)

Cause of fire OPEN BURNING

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	20'	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: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

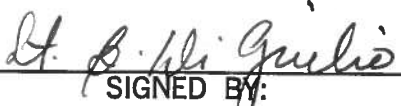
Engines(s) #1 Ladder(s) _____ Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
H. PARISI		
J. MOLLO		
W. DRAPER SR.		
VEHICLE	STATION	ON SCENE
	A. CACCIA	
	M. LA BBADIA	

REMARKS: OPEN BURNING


 SIGNED BY:
 J. MOLLO
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 442 N. P. File # 1137

Date: 11/10/75
MONTH DAY YEAR

Time alarm received 11:58 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 12:00 A M

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

Location of alarm: (Street and Number) _____

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) #6, 2. 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 #
	LT. H. DARBY	
	R. PARENTEAU	
	P. TREMENTOZZI	
	L. TORO	
VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY	W. DEAPER JR.	
	N. PHELAND	
	G. BULPITT SR.	
	F. CHARTIER	
	LT. R. PAQUET	
	CAPT. E. PELLAND	
	G. BULPITT JR.	
	S. COPPA	
	CAPT. E. PELLAND	

REMARKS: CODE BLUE FROM ENG.#2.

Lt. B. Ali Giulio
 SIGNED BY:

LT. H. DARBY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 443 N. P. File # 1138

Date: 11/11/75
MONTH DAY YEAR

Time alarm received 2:36 AM Number of miles traveled 2

Time back in service _____ M

Time back at station 2:44 AM

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

Location of alarm: (Street and Number) 104 COTTAGE 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	☒ 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: #21.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. H. DARBY	W. DRAPER SR.	
R. PARENTEAU	G. BULPITT	
N. PHELAND	CAPT. E. PELLAND	
P. TREMENTOZZI	LT. R. PAQUET	
L. TORO		
F. CHARTIER		
VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY		

REMARKS: CODE BLUE FROM ENG.#2.


 SIGNED BY: _____
 CHIEF J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 444 N. P. File # 1139

Date: 11/11/75
MONTH DAY YEAR

Time alarm received 9:50 A M Number of miles traveled 1

Time back in service _____ M

Time back at station 10:00 A M

Alarm received by: Box # 6212 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) 1828 MINERAL SPRING AVE.

Cause of fire CODE BLUE

Description of building or occupancy: NORTH PROVIDENCE HIGH 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) #3, 4, 1. Ladder(s) #1, 2. Rescue(s) #3. Car: #1.

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. B. DI GIULIO	J. MOLLO	
E. DI GIULIO	H. PARISI	
F. PHILLIPS	R. PARENTEAU	
D. BAZZLE		
P. TREMENTOZZI		
VEHICLE	STATION	ON SCENE
	A. CACCIA	
	M. LABBADIA	

REMARKS: CODE BLUE FROM ENG.#3.

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 # 445 N. P. File # 1143

Date: 11/11/75
MONTH DAY YEAR

Time alarm received 2:26 P M Number of miles traveled 1

Time back in service 2:30 P M

Time back at station 2:31 P M

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

Location of alarm: (Street and Number) 24 JOHN F. KENNEDY CIRCLE

Cause of fire ACCIDENTAL ALARM

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>HOME ALARM</u>

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

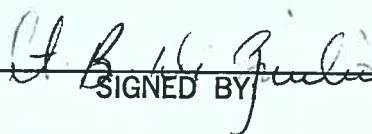
Engines(s) #2, 3 Ladder(s) #1 Rescue(s) _____ Car: #1

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	J. MOLLO	
	H. PARISI	
	P. PHILLIPS	
	R. HUGHES	
	P. LYONS	
VEHICLE	STATION	ON SCENE
	LT. B. DI GIULIO	
	E. DI GIULIO	
	A. CACCIA	
	M. LABBADIA	
	J. ZIROLI	

REMARKS: HOME ALARM SET OFF BY ACCIDENT.


 SIGNED BY

H. PARISI
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 446 N. P. File # 1145

Date: 11/12/75
MONTH DAY YEAR

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

Time back in service _____ M

Time back at station 2:29 P M

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

Location of alarm: (Street and Number) 20 McGUIRE RD.

Cause of fire LOCKOUT

Description of building or occupancy: SPRINGDALE APTS.

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
				1	SCREW DRIVER

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

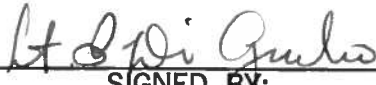
Engines(s) _____ Ladder(s) #1 Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	J. MOLLO	
	P. PHILLIPS	
	N. PHELAND	
VEHICLE	STATION	ON SCENE
	LT. B. DI GIULIO	
	E. DI GIULIO	
	A. CACCIA	
	M. LABBADIA	
	W. DRAPER SR.	

REMARKS: LOCKOUT


 SIGNED BY:
 P. PHILLIPS
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 447 N. P. File # 1146

Date: 11/12/75
MONTH DAY YEAR

Time alarm received 2:34 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 2:40 P M

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

Location of alarm: (Street and Number) MILES & GREENFIELD
CODE BLUE

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) _____ 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		
E. DI GIULIO		
P. PHILLIPS		
N. PHILLIPS		
VEHICLE	STATION	ON SCENE
	H. PARISI	
	J. MOLLO	
	A. CACCIA	
	M. LABBADIA	
	L. CALISI	
	R. HUGHES	
	E. SPAZIANO	

REMARKS: FILL IN FOR ENG.#2.

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 # 448 N. P. File # 11 51

Date: 11/14/75
MONTH DAY YEAR

Time alarm received 7:51 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 8:54 P M

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

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

Cause of fire ELECTRICAL (SHORT)

Description of building or occupancy: VILLA VERSAILLES APTS.

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>ELECTRICAL</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	2/14	Under 35 Feet
	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)		GENERADER RUN		Other Equipment
			30min.	2	SMOKE EJECTORS
					ELEC. CORDS
		3	HANDLIGHTS		DERDERIZER

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	
	D. LANE	
	E. SPAZIANO	
	P. TREMENTOZZI	
	W? ROY	
	P. LYONS	
	G. BULPITT JR.	
VEHICLE	STATION	STATION ON SCENE
CHIEF E. DI GIULIO	CHIEF R. CHARELLO	G. BULPITT SR.
	CAPT. E. PELLAND	F. CHARTIER
	LT. R. PAQUET	D. BAZZLE
	LT. H. DARBY	D. HOUDE
	CAPT. P. RUGGIANO	A. CORSINI
	E. BAZZLE	M. MAGGIACOMO
	R. HUGHES	T. RUSSO
	J. ZIROLI	
	J. LANE	
	N. PHELAND	

REMARKS: CODE YELLOW FOR ENG.#3. AND LADDER#1.

ELECTRICAL FIRE.

E. B. Di Giulio
SIGNED BY:

W. ROY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 449 N. P. File # 1152

Date: 11/15/75
MONTH DAY YEAR

Time alarm received 10:38 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 10:42 P M

Alarm received by: Box # 155 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) EAST & LINCOLN

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) #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 #
CAPT. E. PELLAND	J. BOREK	
T. RUSSO	R. RATHIER	
S. COPPA	P. LYONS	
M. RUSSO	P. TREMENTOZZI	
R. HUGHES	J. ZIROLI	
VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY	G. BULPITT JR.	
	LT. R. PAQUET	
	C. HARRISON	

REMARKS: CODE BLUE FROM ENG.#1.


 SIGNED BY:

CHIEF J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 450 N. P. File # 1158

Date: 11/17/75
MONTH DAY YEAR

Time alarm received 12:04 P M Number of miles traveled 3

Time back in service _____ M

Time back at station 12:20 P M

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

Location of alarm: (Street and Number) VICINITY OF WORCESTER TEXTIAL CO.

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. B. DI GIULIO		
C. SALISBURY		
VEHICLE	STATION	ON SCENE
	L. CALISI	
	E. DI GIULIO	
	T. CACCIA	
	H. PARISI	
	M. LABBADIA	
	P. TREMENTOZZI	

REMARKS: CALL FROM POLICE FOR OPEN BURNING.

DID NOT FIND ANYTHING. CODE BLUE

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 # 451 N. P. File # 1162

Date: 11/17/75
MONTH DAY YEAR

Time alarm received 5:22 P M Number of miles traveled 3

Time back in service _____ M

Time back at station 6:03 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☐ Fire in building	☐ Code Red	☐ 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>LEAVES</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
3	Pump Cans		3 Inch Hose	SALVAGE COVERS	
	Brooms		Other (Describe)		Number Used
	Other (Describe)	1	HANDLIGHT		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 #
B. DI GIULIO		
M. MAGGIACOMO		
E. SPAZIANO		
D. BAZZLE		
VEHICLE	STATION	ON SCENE
	LT. R. PAQUET	
	W. ROY	
	D. HOUDE	
	A. CORSINI	
	M. MOONEY	
	R. PARENTEAU	
	N. PHELAND	
	P. TREMENTOZZI	
	R. HUGHES	
	P. LYONS	

REMARKS: PILE OF LEAVES OFF ZORA ST.

Lt. B. di Giulio
SIGNED BY:

B. DI GIULIO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 452 N. P. File # 1170

Date: 11/19/75
MONTH DAY YEAR

Time alarm received 9:22 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 9:35 P M

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

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

Cause of fire _____

Description of building or occupancy: _____

Owner of building or occupancy: _____

Owner's address: _____

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

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT P. RUGGIANO		
J. MOLLO		
E. BAZZLE		
G. BULPITT JR.		
VEHICLE	STATION	ON SCENE
	CHIEF E. DI GIULIO	
	LT. R. PAQUET	
	R. HUGHES	
	J. ZIROLI	
	D. LANE	
	J. LANE	
	A. CORSINI	
	S. COPPA	
	G. BULPITT SR.	
	D. HOUDE	

REMARKS: FIRE REPORTED BY G. BULPITT JR. BRUSH FIRE REAR CENTREDALE SCHOOL.
NOTIFIED POLICE DEPT. DRIVEWAY TO SCHOOL BLOCKED BY CARS.

Lt. B. Di Giulio
SIGNED BY:

CAPT. P. RUGGIANO
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 453 N. P. File # 1173

Date: 11/20/75
MONTH DAY YEAR

Time alarm received 8:21 P M Number of miles traveled _____

Time back in service _____ M

Time back at station 8:23 P 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: REAR ALMAC'S

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) _____
SMOKE 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)	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: #21

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. R. PAQUET		
D. BAZZLE		
A. CORSINI		
N. PHELAND		
VEHICLE	STATION	ON SCENE
CHIEF J. MURPHY	CAPT. P. RUGCIANO	
	B. DI GIULIO	
	D. HOUDE	
	M. MAGGIACOMO	
	M. MOONEY	
	E. SAPZIANO	
	R. PARENTEAU	
	W. DRAPER JR.	
	F. CHARTIER	
	J. MOLLO	

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 # 454 N. P. File # 1174

Date: 11:21:75
MONTH DAY YEAR

Time alarm received 1:58 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 2:01 P M

Alarm received by: Box # 6212 Phone _____ Other _____ (Describe)

Location of alarm: (Street and Number) 1873 MINERAL SPRING AVE.

Cause of fire CODE BLUE

Description of building or occupancy: NORTH PROVIDENCE HIGH SCHOOL

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. B. DI GIULIO	E. DI GIULIO	
C. SALISBURY	H. PARISI	
	W. DRAPER JR.	
VEHICLE	STATION	ON SCENE
	L. CALISI	
	P. TRMENTOZZI	
	D. BAZZLE	
	S. COPPA	
	R. PARENTEAU	

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 # 455 N. P. File # 1178

Date: 11/21/75
MONTH DAY YEAR

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

Time back in service _____ M

Time back at station 9:28 P M

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

Location of alarm: (Street and Number) MINERAL SPRING & SUNSET 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 ☐ 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>AUTO ACCIDENT</u>

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

APPARATUS REPORT

Working time of pump: Hours: _____ minutes: _____

Defects on apparatus after alarm (if any): _____

Companies responding: _____

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

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE # 1
CHIEF J. MURPHY		CAPT. P. RUGGIANO
R. RATHIER		S. LIBUTTI
S. COPPA		J. BART
J. BOREK		M. LABBADIA
W. ROY		
VEHICLE	STATION	ON SCENE
CHIEF R. CHARELLO	LT. R. PAQUET	
CHIEF E. DI GIULIO	T. RUSSO	
	M. RUSSO	
	G. BULPITT SR.	
	R. HUGHES	
	J. MOLLO	
	J. ZIROLI	

REMARKS: WOMEN STOPPED AT HDGS. NOTIFIED US OF ACCIDENT.

TRANSPORTED BY RES. #1,

LINDA PLACIDO

JOHN LOMBA

15 SPENCER RD.

1 SWEET AVE.

SMITHFIELD, R.I.

NO. PROV. R.I.

AGE. 18

AGE. 12

SIGNED BY:

CHIEF J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 456 N. P. File # 1181

Date: 11/22/75
MONTH DAY YEAR

Time alarm received 10:30 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 10:38 P M

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

Location of alarm: (Street and Number) WOONASQUATUCKET & REDFERN

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>SWEEP DOWN</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	
3	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: _____

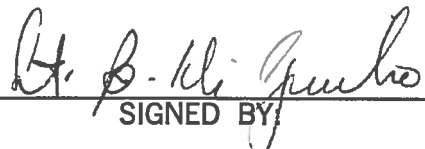
Engines(s) #1 Ladder(s) _____ Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. H. DARBY		
N. PHELAND		
L. TORO		
F. CHARTIER		
R. RATHIER		
E. SPAZIANO		
VEHICLE	STATION	ON SCENE
LT. R. PAQUET	W. DRAPER JR.	
W. ROY	G. BULPITT SR.	
G. BULPITT JR.	P. TREMENTOZZI	
	J. ZIROLI	

REMARKS: SWEEP GLASS OFF OF ROAD.



 SIGNED BY
 LT. H. DARBY

 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 457 N. P. File # 1182

Date: 11/22/75
MONTH DAY YEAR

Time alarm received 11:58 P M Number of miles traveled 1

Time back in service _____ M

Time back at station 12:02 A M

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

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

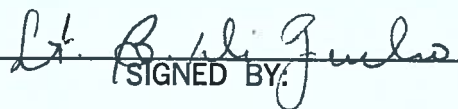
Engines(s) #2, 1 Ladder(s) #1 Rescue(s) _____ Car: _____

Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. H. DARBY		
N. FHELAND		
P. TREMENTOZZI		
L. TORO		
F. CHARTIER		
G. KENNAWAY		
VEHICLE	STATION	ON SCENE
LT. R. PAQUET	W. DRAPER JR.	
	G. BULPITT SR.	
	J. ZIROLI	
	R. RATHIER	
	G. BULPITT JR.	

REMARKS: CODE BLUE FROM ENG.#2.


 SIGNED BY:

LT, H. DARBY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 458 N. P. File # 1183

Date: 11/23/75
MONTH DAY YEAR

Time alarm received 3:12 P M Number of miles traveled 2

Time back in service _____ M

Time back at station 3:35 P M

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

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

Cause of fire INVESTIGATION

Description of building or occupancy: MR. CHRISTMAS

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>STINK BOMB</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)	<u>1</u>	HANDLIGHT		Other Equipment
			DEODORIZER		

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: S.S. LADDER #1.

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. E. PELLAND	G. BULPITT SR.	
L. TORO	J. MOLLO	
F. CHARTIER	J. ZIROLI	
E. SPAZIANO	G. BULPITT JR.	
R. HUGHES	B. ZAMBARANO	
VEHICLE	STATION	ON SCENE
CHIEF E. DI GIULIO	CHIEF R. CHARELLO	
CHIEF J. MURPHY	N. PHELAND	
J. PICCARDI	R. PARENTEAU	
	R. RATHIER	
	W. DRAPER SR.	

REMARKS: STINK BOMB IN BUILDING.
SPECIAL SIGNAL FOR LADDER #1.

E. B. Di Giulio
SIGNED BY:

CHIEF J. MURPHY
PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 459 N. P. File # 1185

Date: 11/25/75
MONTH DAY YEAR

Time alarm received 12:04 A M Number of miles traveled 1

Time back in service _____ M

Time back at station 12:08 A M

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

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

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. 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	
J. LANE	E. BAZZLE	
G. KENNAWAY	D. LANE	
R. HUGHES	D. BAZZLE	
J. ZIROLI	R. RATHIER	
S. COPPA		
VEHICLE	STATION	ON SCENE
	CHIEF J. MURPHY	
	N. PHELAND	
	G. BULPITT	

REMARKS: CODE BLUE FROM ENG.#1.

Capt. P. Ruggiano

SIGNED BY:

CAPT. P. RUGGIANO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 460 N. P. File # 1187

Date: 11/26/75
MONTH DAY YEAR

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

Time back in service _____ M

Time back at station 2:21 P M

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

Location of alarm: (Street and Number) 1592 MINERAL SPRING AVE.

Cause of fire _____

Description of building or occupancy: BURGER KING

Owner of building or occupancy: SAME

Owner's address: _____

CLASSIFICATION OF ALARM	FIRE CODE	ALARM WITH NO FIRE
☒ Fire in building	☒ Code Red	☐ Rescue or emergency
☐ Fire in dwelling	☐ Code Yellow	☐ 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) #2. Rescue(s) _____ Car: #1.

Other companies responding: S.S. ENG. #1.

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

ENGINE(S) #	LADDER(S) #	RESCUE #
LT. B. DI GIULIO		
E. DI GIULIO		
C. SALISBURY		
CHIEF J. MURPHY		
G. KENNAWAY		
VEHICLE	STATION	ON SCENE
J. BOREK	J. MOLLO	
S. COPPA	L. CALISI	
	J. ZIROLI	
	A. CORSINI	
	G. BULPITT JR.	
	W. DRAPER SR.	

REMARKS: FIRE IN KITCHEN AREA OVER STOVE. BURN THRU ROOF.

LT. B. Di Giulio
 SIGNED BY:

CHIEF J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 461 N. P. File # 1188
 Date: 11/26/75

Time alarm received 6:04 P M
 Time back in service _____ M
 Time back at station 6.44 P M

Number of miles traveled 4

Alarm received by: Box # _____ Phone XX Other _____ (Describe)
 Location of alarm: (Street and Number) 2 GREYSTONE AVE.
 Cause of fire WATER SURGE IN SPRINKLERS.
 Description of building or occupancy: WORCESTER TE XTILE
 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) R.I.E.P. ALARM

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) _____ Car: #1, 2, 21, 23.
 Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF R. CHAELLO	J. BOREK	
CAPT E. PELLAND	M. RUSSO	
T. RUSSO	CAPT. P. RUGGIANO	
S. COPPA	D. HOUDE	
P. TREMENTOZZI		
VEHICLE	STATION	XXXXXXXXXX ON SCENE
CHIEF E. DI GIULIO	G. BULPITT SR.	VEHICLE
CHIEF J. MURPHY		J. ZIROLI
R. RATHIER		M. MAGGIACOMO
G. KENNAWAY		W. ZAMBARANO
G. BULPITT JR.		D. HOUDE
R. PARENTEAU		
N. PHELAND		
F. CHARTIER		
J. MOLLO		
R. HUGHES		

REMARKS: WATER SURGE, ZONE#3.

SIGNED BY: H. B. White

CHIEF

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Secondary Fire District Report

Company CENTREDALE Company Alarm # 462 N. P. File # 1189

Date: 11/26/75
MONTH DAY YEAR

Time alarm received 7:12 P M Number of miles traveled 3

Time back in service _____ M

Time back at station 7:34 P M

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

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

Cause of fire _____

Description of building or occupancy: DILLON COUNCIL

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, X. Ladder(s) #2. Rescue(s) #3. Car #1, 2, 21.

Other companies responding: S.S. ENG. #1, RES. #3.

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. E. PELLAND		
T. RUSSO		
S. COPPA		
M. RUSSO		
G. BULPITT JR.		
M. MAGGIACONO		
N. PHELAND		
G. KENNAWAY		
R. HUGHES		
VEHICLE	STATION	ON SCENE
CHIEF R. CHARELLO	J. BOREK	
CHIEF E. DI GIULIO	R. RATHIER	
CHIEF J. MURPHY	LT. R. PAQUET	
J. LANE	W. ZAMBARANO	
	R. PARENTEAU	
	P. TREMENTOZZI	
	LT. H. DARBY	
	CAPT. P. RUGGIANO	
	J. MOLLO	
	J. ZIROLI	

F. CHARTIER

REMARKS: CODE RED FROM ENG.#3.

R. Charello
SIGNED BY:

CHIEF R. CHARELLO

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 463 N. P. File # 1190
 Date: 11/ 26/75
MONTH DAY YEAR

Time alarm received 11:11 P M Number of miles traveled 1
 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) 530 SMITHFIELD RD.
 Cause of fire STOVE
 Description of building or occupancy: INTERNATIONAL APTS.
 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: _____
 Engines(s) #1, 3, 2. Ladder(s) #1. Rescue(s) _____ Car: #1, 2.
 Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CHIEF J. MURPHY	J. BOREK	
CAPT. E. PELLAND	R. RATHIER	
T. RUSSO	P. LYONS	
S. COPPA	A. CORSINI	
M. RUSSO		
G. BULPITT JR.		
VEHICLE	STATION	ON SCENE
CHIEF R. CHAELLO	CAPT. P. RUGGIANO	
CHIEF E. DI GIULIO	R. HUGHES	
	W. ROY	

REMARKS: FOOD IN STOVE, OUT ON ARRIVAL?
 LIGHT ODER OF SMOKE THROUGHT OUT BLDG.

SIGNED BY:
 CHIEF J. MURPHY
 PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 464 N. P. File # 1195

Date: 11/28/75
MONTH DAY YEAR

Time alarm received 7:57 A M Number of miles traveled 1

Time back in service _____ M

Time back at station 8:03 A M

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

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

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	
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)	1 pr.	ASBESTOS GLOVES		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		
E. DI GIULIO		
C, SALISBURY		
J. ZIROLI		
VEHICLE	STATION	ON SCENE
	J. MOLLO	

REMARKS: CARBURETOR CAUGHT FIRE FROM GASOLINE LEAK.

OWENER:

ANTHONY PHILLIPS

PLY. VALIANT, COLOR BLUE

1905 SMITH ST.

R.I. REG.TP315

NO. PROVE.R.I.

NO FIRE INS.

Lt. B. Di Giulio

SIGNED BY:

LT. B. DI GIULIO

PERSON IN CHG.

CODE SHEET

1. Month in which fire occurred	<u>11</u>
2. Community in which fire occurred	<u>24</u>
3. Cause	<u>1</u>
4. If Accidental, specific cause	<u>11</u>
5. If Incendiary, suspected motive	<u>-</u>
6. If Suspicious, suspected motive	<u>-</u>
7. Suspicion directed toward	<u>-</u>
8. Type of structure	<u>12</u>
9. Occupied by whom	<u>1</u>
10. Insurance	<u>No</u>
11. Total Amount of Insurance	<u>-</u>
12. Estimated loss	<u>0</u>
Name and Address of Owner	<u>ANTHONY Phillips</u>
	<u>1905 SMITH ST N.P.</u>
Name of Occupant	<u>SAME</u>

COMPLETE AND RETURN TO STATE DIVISION OF FIRE SAFETY

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 465 N. P. File # 1196
 Date: 11/29/75
MONTH DAY YEAR
 Time alarm received 1:51 A M Number of miles traveled 13
 Time back in service 2:12 A M
 Time back at station 2:20 A M
 Alarm received by: Box # 139 Phone _____ Other _____ (Describe)
 Location of alarm: (Street and Number) SMITH & FENWAY
 Cause of fire AUTO ACCIDENT
 Description of building or occupancy: _____
 Owner of building or occupancy: _____
 Owner's address: _____

CLASSIFICATION OF ALARM ☐ Fire in building ☐ Fire in dwelling ☐ Fire in brush or grass ☐ Fire in rubbish ☐ Fire in dump ☐ Fire in vehicle ☐ Miscellaneous fires (describe) _____	FIRE CODE ☐ Code Red ☒ Code Yellow ☐ Code Blue	ALARM WITH NO FIRE ☒ Rescue or emergency ☐ Water emergency ☐ Lockout ☐ Accidental alarms ☐ False alarm ☐ Miscellaneous alarm (describe) <u>AUTO ACCIDENT</u>
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EXTINGUISHMENT USED	TYPE & FEET HOSE LINES USED	LADDERS USED	
Carbon Dioxide	100' Booster 1"	Aerial	
Dry Chemical	1 1/2 Inch Hose	Over 35 Feet	
Foam	2 1/2 Inch Hose	Under 35 Feet	
<u>1</u> Pump Cans	3 Inch Hose	SALVAGE COVERS	
Brooms	Other (Describe)	Number Used	
Other (Describe)	<u>2</u> HANDLIGHT	Other Equipment	
	<u>1</u> PRY AXE		

APPARATUS REPORT

20

Working time of pump: Hours: _____ minutes: _____
 Defects on apparatus after alarm (if any): _____
 Companies responding: #1, 8. #1. #1. #2, 21.
 Engines(s) _____ Ladder(s) _____ Rescue(s) _____ Car: _____
 Other companies responding: _____

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

ENGINE(S) #	LADDER(S) #	RESCUE #
CAPT. P. RUGGIANO	E. BAZZLE	
J. LANE	D. LANE	
G. KENNAWAY	D. BAZZLE	
R. HUGHES		
J. ZIROLI		
VEHICLE	STATION	ON SCENE
J. MOLIO	LT. R. PAQUET	
S. MARWELL	G. BULPITT JR.	
CHIEF E. DI GIULIO	N. PHELAND	
CHIEF J. MURPHY	S. COPPA	
	G. BULPITT SR.	

REMARKS: TED HACKETT?

1972 OLDSMOBILE

R.I. REG.#SQ 399

Ch. B. Di Giulio
 SIGNED BY:

CHIEF J. MURPHY

PERSON IN CHG.

NORTH PROVIDENCE FIRE DEPARTMENT

Primary Fire District Report

Company CENTREDALE Company Alarm # 466 N. P. File # 1198
 Date: 11/29/75
MONTH DAY YEAR

Time alarm received 7:44 P M Number of miles traveled 3
 Time back in service M
 Time back at station 7:48 P M

Alarm received by: Box # 415 Phone Other (Describe)
 Location of alarm: (Street and Number) HIGH SERVICE & MURRAY
 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: #2, 3. #1.
 Engines(s) Ladder(s) Rescue(s) Car: #1.
 Other companies responding:

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

ENGINE(S) #	LADDER(S) #	RESCUE #
	LT. R. PAQUET	
	D. BAZZLE	
	W. ROY	
	L. TORO	
VEHICLE	STATION	ON SCENE
CHIEF R. CHARELLO	D. HOUDE	
J. ZIROLI	A. CORSINI	
W. ZAMBARANO	M. MAGGIACOMO	
	E. SPAZIANO	
	B. DI GIULIO	
	LT. H. DARBY	
	J. BOREK	

REMARKS: CODE BLUE FROM LADDER#1.

LT. R. Paquet
SIGNED BY:

LT. R. PAQUET
PERSON IN CHG.