

Boone Trail Emergency Services

7016 U.S. 412 N. Lillington, NC 27546

P.O. Box 411 Makers, NC 27552

Phone: 910-893-3750 Fax: 910-893-5092

District Chief: Tony Currin

To whom it may concern,

Boone Trail Emergency Services responded to a mobile home structure fire on October 11th, 2018 at 18 Grace Ln. Broadway, NC. Attach is the fire report.

Boone Trail Emergency Services

7016 U.S. 412 N. Lillington, NC 27546

P.O. Box 411 Makers, NC 27552

Phone: 910-893-3750 Fax: 910-893-5092

District Chief: Tony Currin

To whom it may concern:

18 Grace Lane had a single wide trailer that has been removed by owner, Craig Taylor.

Thanks,


Chief Tony Currin

A FDIN * 04317 State * NC Incident Date * MM 10 DD 11 YYYY 2018 Station BT1 Incident Number * 18-0001153 Exposure * 000 Deleted Change No Activity NFIRS -1 Basic

B Location* Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B "Alternative Location Specification". Use only for Wildland fires. **Category Tract** _____

Street address Intersection In front of Rear of Adjacent to Directions

Number/Milepost 18 Prefix _____ Street or Highway GRACE Street Type LN Suffix _____

Apt./Suite/Room _____ City BROADWAY State NC Zip Code 27505

Cross street or directions, as applicable _____

C Incident Type * 111 Building fire Incident Type _____

E1 Date & Times Midnight is 0000
 Check boxes if dates are the same as Alarm Date. ALARM always required
 Alarm * 10 11 2018 07:09:30
 ARRIVAL required, unless canceled or did not arrive
 Arrival * 10 11 2018 07:20:14
 CONTROLLED optional, except for wildland fires
 Controlled _____
 LAST UNIT CLEARED, required except for wildland fires
 Last Unit 10 11 2018 08:36:26
 Cleared

D Aid Given or Received *

1 Mutual aid received Automatic aid recv. Mutual aid given Automatic aid given Other aid given None

Their FDID _____ Their State _____
 Their Incident Number _____

E2 Shift & Alarms Local Option D 01 012
 Shift or Alarm District D 01 012
 Platoon _____

E3 Special Studies Local Option _____
 Special Study ID# _____ Special Study Value _____

F Actions Taken *

11 Extinguishment by fire
 Primary Action Taken (1)

Additional Action Taken (2) _____

Additional Action Taken (3) _____

G1 Resources * Check this box and skip this section if an Apparatus or Personnel form is used.

Apparatus Personnel
 Suppression 0004 0010
 EMS _____
 Other _____

Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses & Values LOSSES: Required for all fires if known. Optional for non-fires.

Property \$ _____, _____, _____ 000, 000
 Contents \$ _____, _____, _____ 000, 000
 PRE-INCIDENT VALUE: Optional
 Property \$ _____, _____, _____ 000, 000
 Contents \$ _____, _____, _____ 000, 000

Completed Modules

Fire-2
 Structure-3
 Civil Fire Cas.-4
 Fire Serv. Cas.-5
 EMS-6
 HazMat-7
 Wildland Fire-8
 Apparatus-9
 Personnel-10
 Arson-11

H1 * Casualties None

Deaths Injuries
 Fire Service _____
 Civilian _____

H2 Detector Required for Confined Fires.
 1 Detector alerted occupants
 2 Detector did not alert them
 U Unknown

H3 Hazardous Materials Release

N None

1 Natural Gas: slow leak, no evacuation or hazard actions
 2 Propane gas: 20 lb. tank (as in home BBQ grill)
 3 Gasoline: vehicle fuel tank or portable container
 4 Kerosene: fuel burning equipment or portable storage
 5 Diesel fuel/fuel oil vehicle fuel tank or portable
 6 Household solvents: home/office spill, cleanup only
 7 Motor oil: from engine or portable container
 8 Paint: from paint cans totaling < 55 gallons
 0 Other: Special Hazmat actions required or spill > 55 gal., Please complete the Hazmat form.

T Mixed Use Property

NN Not Mixed
 10 Assembly use
 20 Education use
 30 Medical use
 40 Residential use
 51 Row of stores
 53 Enclosed mall
 58 Bus. & Residential
 59 Office use
 60 Industrial use
 63 Military use
 65 Farm use
 00 Other mixed use

J Property Use* Structures

131 Church, place of worship
 161 Restaurant or cafeteria
 162 Bar/Tavern or nightclub
 213 Elementary school or kindergarten
 215 High school or junior high
 241 College, adult education
 311 Care facility for the aged
 331 Hospital

Outside
 124 Playground or park
 655 Crops or orchard
 669 Forest (timberland)
 807 Outdoor storage area
 919 Dump or sanitary landfill
 931 Open land or field

341 Clinic, clinic type infirmary
 342 Doctor/dentist office
 361 Prison or jail, not juvenile
 419 1-or 2-family dwelling
 429 Multi-family dwelling
 439 Rooming/boarding house
 449 Commercial hotel or motel
 459 Residential, board and care
 464 Dormitory/barracks
 519 Food and beverage sales

936 Vacant lot
 938 Graded/care for plot of land
 946 Lake, river, stream
 951 Railroad right of way
 960 Other street
 961 Highway/divided highway
 962 Residential street/driveway

539 Household goods, sales, repairs
 579 Motor vehicle/boat sales/repair
 571 Gas or service station
 599 Business office
 615 Electric generating plant
 629 Laboratory/science lab
 700 Manufacturing plant
 819 Livestock/poultry storage (barn)
 882 Non-residential parking garage
 891 Warehouse

981 Construction site
 984 Industrial plant yard

Markup and enter a Property Use code only if you have NOT checked a Property Use box:
 Property Use 400
Residential, Other

K1 Person/Entity Involved
Local Option

Business name (if applicable) _____ Area Code _____ Phone Number _____

Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr., Ms., Mrs. First Name _____ MI _____ Last Name _____ Suffix _____

Number _____ Prefix _____ Street or Highway _____ Street Type _____ Suffix _____

Post Office Box _____ Apt./Suite/Room _____ City _____

State _____ Zip Code _____

More people involved? Check this box and attach Supplemental Forms (NFIRS-15) as necessary

K2 Owner Same as person involved? Then check this box and skip the rest of this section.

Local Option Business name (if applicable) _____ Area Code **919** Phone Number **499** - **7381**

Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr., Ms., Mrs. First Name **GRAIG** MI _____ Last Name **TAYLOR** Suffix _____

Number **18** Prefix _____ Street or Highway **GRACE** Street Type **LN** Suffix _____

Post Office Box _____ Apt./Suite/Room _____ City **BROADWAY**

State **NC** Zip Code **27505**

L Remarks
Local Option

[10/11/2018 08:26:08 : pos2 : RMCARDLE1606]
LEE CO BACK CLEAR

[10/11/2018 07:27:11 : pos3 : SROBERTS]
CANCEL DIST 11 PER I/C

[10/11/2018 07:26:02 : pos3 : SROBERTS]
FIRE UNDER CONTROL

[10/11/2018 07:25:13 : pos3 : SROBERTS]
FM5 DIRECT ON TRAFFIC WILL ADVISE WHEN ENRO

[10/11/2018 07:24:58 : pos3 : SROBERTS]
I/C REQ FM ON CALL. SAME IS NOT FULLY INVOLVED

[10/11/2018 07:24:45 : pos5 : dparrilla]
DUKE NOTIFIED

[10/11/2018 07:20:23 : pos3 : SROBERTS]
1200 I/C

[10/11/2018 07:19:38 : pos3 : SROBERTS]
LEE CO 57 ON LOC

[10/11/2018 07:19:14 : pos3 : SROBERTS]

L Authorization

Officer in charge ID **129890** Signature **Currin, Tony** Position or rank **DTC** Assignment _____ Month **10** Day **16** Year **2018**

Check box if same as Officer in charge. Member making report ID **129890** Signature **Currin, Tony** Position or rank **DTC** Assignment _____ Month **10** Day **16** Year **2018**

04317 FDID *	NC State *	10 11 Incident Date *	2018 YYYY	BT1 Station	18-0001153 Incident Number *	000 Exposure *	Complete Narrative
-----------------	---------------	--------------------------	--------------	----------------	---------------------------------	-------------------	-----------------------

Narrative:

[10/11/2018 08:26:08 : pos2 : RMCARDLE1606]
LEE CO BACK CLEAR

[10/11/2018 07:27:11 : pos3 : SROBERTS]
CANCEL DIST 11 PER I/C

[10/11/2018 07:26:02 : pos3 : SROBERTS]
FIRE UNDER CONTROL

[10/11/2018 07:25:13 : pos3 : SROBERTS]
FM5 DIRECT ON TRAFFIC WITH ADVISE WHEN ENRO

[10/11/2018 07:24:58 : pos3 : SROBERTS]
I/C REQ FM ON CALL. SAME IS NOT FULLY INVOLVED

[10/11/2018 07:24:45 : pos5 : dparrilla]
DUKE NOTIFIED

[10/11/2018 07:20:23 : pos3 : SROBERTS]
1200 I/C

[10/11/2018 07:19:38 : pos3 : SROBERTS]
LEE CO 57 ON LOC

[10/11/2018 07:19:14 : pos3 : SROBERTS]
SINGLE WIDE FULLY INVOLVED PER MED12

[10/11/2018 07:18:17 : pos3 : SROBERTS]
Cross streets: MCNEILL MILL RD//

[10/11/2018 07:17:56 : pos3 : SROBERTS]
CAROLINA TRACE F/F 802 ON LOC SAME IS FULLY INVOLVED AND SAME IS 18 GRACE LN

[10/11/2018 07:16:42 : pos3 : SROBERTS]
CORRECT ADDRESS 18 GRACE LN

[10/11/2018 07:14:20 : pos3 : SROBERTS]
LEE CO 57 ENRO

[10/11/2018 07:12:39 : pos3 : SROBERTS]
1101 1N SERV

[10/11/2018 07:10:34 : pos5 : dparrilla]
** EFD Case Complete **

[10/11/2018 07:10:08 : pos5 : dparrilla]
** EFD Key Questions Finished **

Key Questions:

5. It is not known if anyone is trapped inside the structure.
6. The exact location of the fire is: CALLER ADV SAME IF FULLY INVOLVED
7. It is not known if anyone is injured.

04317 FDID *	NC State *	10 Incident Date *	11 Incident Date *	2018 Year	BTI Station	18-0001153 Incident Number *	000 Exposure *	Complete Narrative
-----------------	---------------	-----------------------	-----------------------	--------------	----------------	---------------------------------	-------------------	-----------------------

Narrative:

[10/11/2018 07:09:38 : pos5 : dparrilla]

** EFD Recommended Dispatch **

Response Text: Code 3

Dispatch Level: 69D10

CAD Incident Code: FIRE RES STR

Determinant: Mobile home, house trailer, portable office

Key Questions:

1. The caller is on scene (1st party).
2. Both smoke and flames are visible.
3. The incident involves a mobile home.
4. A single-level structure is involved.

[10/11/2018 07:09:28 : pos4 : JSRADLEY]

LEE COUNTY STA 5 ADV

[10/11/2018 07:09:24 : pos5 : dparrilla]

RES NEXT TO 1380 MCNEILL MILL RD

[10/11/2018 07:09:09 : pos5 : dparrilla]

** EFD Case Entry Finished **

Chief Complaint Number: 69

Chief Complaint: Structure Fire

Problem Statement: MOBILE HOME ON FIRE

[10/11/2018 07:08:36 : pos5 : dparrilla]

Cross streets: GRACE LN/MCARTHUR RD

Cross streets: ROSSER PITTMAN RD//DEAD END

ALI X Coordinate: -079.029400

ALI Y Coordinate: 035.418270

**Nearest Address: 27 GRACE LN, BROADWAY

MOBILE HOME ON FIRE

CALLER BELIEVES SAME IS VACANT

12 FIRE DISPATCHED TO A RESIDENTIAL STRUCTURE FIRE UPON ARRIVAL FOUND THAT A SINGLE WIDE MOBILE HOME WHICH WAS ABANDAN WAS ABOUT 25% INVOLVED. PULLED 2 1 3/4 LINES TO PUT SAME OUT. NO INTERIOR ATTACK. CAUSE OF FIRE APPEARS TO BE FROM A PUSH PILE THAT WAS APPROX 10 FEET FROM MOBILE HOME. 12 FIRE RESPONDED TO THAT LOCATION AT 8 PM. TO PUT OUT THE PUSH PILE WHICH WAS CALL IN BY A PASSERBBY. THE NCALLED BACK OUT AT 7AM THE NEXT MORNING WITH THE MOBILE HOME ON FIRE. HOMEOWNER ADVISED HE HAD SOMEONE TEARING DOWN THE MOBILE HOME. ALSO, THE NEIGHBOR ADVISED SHE SAW SOMEONE AT THE LOCATION WITH GAS CANS AROUND THE SAME AT 7 O'CLOCK THE PREVIOUS NIGHT. 12 FIRE ALONG WITH MUTUAL AID PUT SAME OUT. 1200 ALSO CANCELLED ALL 12 FIRE AND MUTUAL AID THAT WAS NOT ON SCENE OR ENROUTE. CAUSE OF FIRE APPEARS TO COME FROM THE PUSH UP PILE. 1200 ALSO MADE CONTACT WITH HOMEOWNER TO ADVISED HIM OF THE SITUATION. ALL 12 FIRE ASSIGNMENT COMPLETE.

NEIGHBOR INFO:

SAVANNAH HERRICK

117 GRACE LN. BROADWAY, NC

910-514-4551