



FIRE REPORT (Casualty)

Table with columns: LOCATION, YEAR, MONTH, DAY, HOUR, OCC. Sub-header: INCIDENT NUMBER

OFFICE OF THE FIRE COMMISSIONER
PO Box 9201 Stn. Prov. Govt.
Victoria BC V8W 9J1
TEL (250) 952-4913 FAX (250) 952-4888

VICTIM SURNAME GIVEN NAME(S)

ADDRESS SUITE, NUMBER, STREET AND CITY

AGE SEX: MALE FEMALE STATUS: FIREFIGHTER CIVILIAN

NATURE OF CASUALTY
1 DEATH
2 LIGHT INJURY (HOSP. 1-2 DAYS AND/OR OFF WORK 1 - 15 DAYS)
3 MINOR INJURY (LESS THAN ONE DAY IN HOSPITAL OR OFF WORK)
4 SERIOUS INJURY (HOSPITAL 3+ DAYS AND/OR OFF WORK 15+ DAYS)

CONDITION OF CASUALTY
10 CONDITION OF CASUALTY UNKNOWN
11 ASLEEP AT TIME OF FIRE
12 BEDRIDDEN OR OTHER PHYSICAL HANDICAP
13 IMPAIRMENT BY ALCOHOL, DRUGS OR MEDICATION
14 AWAKE OR NO PHYSICAL OR MENTAL IMPAIRMENT AT THE TIME OF FIRE
15 UNDER RESTRAINT OR DETENTION
16 TOO YOUNG TO REACT TO FIRE
17 MENTAL HANDICAP (SENILE)
18 LEFT UNATTENDED (INFANT)
19 CONDITION OF CASUALTY - UNCLASSIFIED

ACTION OF CASUALTY
20 ACTION OF CASUALTY UNKNOWN
21 INJURED WHILE ATTEMPTING TO ESCAPE
22 OVER-EXERTION, HEART ATTACK
23 VOLUNTARILY ENTERED OR REMAINED FOR RESCUE PURPOSE
24 VOLUNTARILY ENTERED OR REMAINED FOR FIRE FIGHTING
25 VOLUNTARILY ENTERED AND REMAINED TO SAVE PERSONAL PROPERTY
26 LOSS OF JUDGEMENT OR PANIC
27 RECEIVED DELAYED WARNING
28 DID NOT ACT
29 ACTION OF CASUALTY UNCLASSIFIED

CAUSE OF INJURY
100 SMOKE INHALATION
101 BURNS RESULTING FROM FIRE AND FLAMES
102 BURNS RESULTING FROM HOT SUBSTANCES
103 STRUCK BY OBJECTS OR PERSONS
104 INJURY CAUSED BY FALLS
105 INJURY CAUSED BY EXPLOSIVES
107 UNCLASSIFIED
108 UNKNOWN

IGNITION OF CLOTHING OR OTHER FABRICS
30 NOT APPLICABLE
31 OUTER CLOTHING
32 SLEEPWEAR
33 UNDERCLOTHING
34 COSTUME
35 BEDDING OR BED LINEN
36 MATTRESS OR PILLOW
37 UPHOLSTERED FURNITURE
38 RUGS
39 UNCLASSIFIED

TYPE OF FABRIC OR MATERIAL IGNITED
40 NOT APPLICABLE
41 COTTON
42 WOOL
43 OTHER NATURAL FIBRE
44 SYNTHETIC FIBRE
45 MIXTURE OF FIBRES
46 RUBBER
47 PLASTIC OR PLASTIC FOAM
48 UNCLASSIFIED

CAUSE OF FAILURE TO ESCAPE
50 UNKNOWN
51 TRAPPED BY RAPID SPREADING OF FIRE/SMOKE THROUGH VERTICAL OPENINGS, STAIRWAYS, ELEVATORS
52 TRAPPED BY RAPID SPREADING OF FIRE/SMOKE THROUGH HORIZONTAL OPENINGS
53 HIGH FLAME SPREAD OF COMBUSTIBLE INTERIOR FINISH OF WALLS, CEILINGS, OR FLOORS
54 BUILDING COLLAPSE
55 FALLING DEBRIS
56 EXPLOSION
57 EXIT LOCKED, BLOCKED OR OBSTRUCTED
58 OUTDOOR FIRE INCLUDES FOREST/BRUSH FIRES
59 UNCLASSIFIED OR NOT APPLICABLE

DATE OF DEATH YY MM DD

NAME OF INVESTIGATOR (PLEASE PRINT) LAFB BADGE NUMBER (IF APPLICABLE) TELEPHONE REPORT DATE (YYYY/MM/DD)