Appendix A

FIRE INCIDENT REPORT

Building			
Date	Time	a.m	p.m.
Immediate location of fire (such as velectrical appliance, etc.)			
Area location of fire (such as resider			
Cause of fire (such as overloading egrease, etc.)	lectrical circuits, smokin	ng in bed, ignition fro	m candle flame or ho
If possible that fire was deliberately	set, explain		
Person responsible for fireAddress		Phone	
Who reported fireAddress			
WitnessesAddress			
WitnessesAddress			
How fire was extinguishedBy whom			
Fire reported to Local Fire Department	Other (e.	Physical Plant xplain)	
Did fire alarm sound?	yesno	not applicab	le
Was building evacuated?	yesno	not applicab	le
Person making this report			
Title	Date	Time	