

NFPA 906

Guide for Fire Incident Field Notes

1998 Edition



National Fire Protection Association, 1 Batterymarch Park, PO Box 9101, Quincy, MA 02269-9101
An International Codes and Standards Organization

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NFPA 906
Guide for
Fire Incident Field Notes

1998 Edition

This edition of NFPA 906, *Guide for Fire Incident Field Notes*, was prepared by the Technical Committee on Fire Reporting and acted on by the National Fire Protection Association, Inc., at its Annual Meeting held May 18–21, 1998, in Cincinnati, OH. It was issued by the Standards Council on July 16, 1998, with an effective date of August 5, 1998, and supersedes all previous editions.

This edition of NFPA 906 was approved as an American National Standard on August 6, 1998.

Origin and Development of NFPA 906

The proper recording of information about an incident is one of the most effective tools available to a fire investigator. To assist in this endeavor, the NFPA Fire Reporting Committee established a subcommittee to develop a guide to provide persons investigating fires, whether as the company officer, incident commander, fire department or fire marshal investigative specialist, or private investigator, with a tool for taking notes in an organized manner while collecting data about the incident. Using information and input from a variety of sources, the committee developed a series of forms to be used locally in the documentation of an incident by those conducting the investigation. The first edition of this guide was published in 1988.

The committee realizes that through a more organized collection of data in the field, a more complete incident report and/or investigative report can be produced that will ultimately lead to better data to solve the fire problem. It was not the intent of the committee that these forms by themselves be an investigative or fire incident report. All local units of government and private industry involved in fire investigation are encouraged to utilize these forms in the way best suited for their situation.

This edition of the document is a reconfirmation of the 1993 edition.

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This list represents the membership at the time the Committee was balloted on the text of this edition. Since that time, changes in the membership may have occurred. A key to classifications is found at the back of this document.

NOTE: Membership on a committee shall not in and of itself constitute an endorsement of the Association or any document developed by the committee on which the member serves.

Committee Scope: This Committee shall have primary responsibility for documents on standard methods of compiling fire experience data by the fire service. The main purposes of this Committee are to develop standard occupancy and cause classification for use by cities and states in the reporting of fires, to suggest other useful information that needs to be collected, and to develop standard forms for these purposes.

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Guide for
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Chapter 1 General

1-1 Scope. The scope of this guide is to aid investigators in collecting and recording preliminary information needed for the preparation of a formal incident report. This guide does not cover the interpretation and use of the information.

1-2 Purpose. This guide explains a series of suggested forms that can be used during a fire investigation to record field notes. The forms serve as a reminder of the type of information that can be helpful in understanding the fire.

1-3 Application. This guide contains instructions for the completion of the fire incident field note forms. It has been developed to provide those investigating a fire with a basic system for collecting data and information in a consistent manner so it can then be studied to reach a conclusion regarding a particular incident. The field note forms are not designed or intended to be a complete report but rather to serve as input for developing a final investigative report. They also are not intended to provide all known incident information.

The guidelines for using these forms are only suggestions, as each particular agency should utilize the forms in the way that best suits its needs. The forms are simple to complete and are designed to be handwritten with large areas for comments that can be developed as the investigation continues. The forms shown in this guide are designed to collect descriptive observations rather than definitive conclusions.

Not all forms will be used at all incidents. However, several forms could be used on any specific fire, depending on the magnitude of the investigation or the type of incident. Supplemental local forms should be used as needed. The case supervision form should be used to keep track of the progress of the investigation.

Chapter 2 Recording of Fire Incident Data

2-1 Preparation of Reports. These forms and the information recorded on them are not designed to constitute the

incident report. They provide data helpful in reaching conclusions as to what happened so that the incident report or the investigation report can be prepared. If an incident report has already been filed, part of the process of using this data should be to verify the original incident report and update that report as necessary so that the most accurate information is contained in the incident report and any databases that contain that incident information.

2-2 Forms. There are 12 forms shown and described in this guide. These forms and their applications are listed in Table 2-2.

Table 2-2 Forms for Recording Fire Incident Field Notes

| Form | Purpose |
|------------------------------|--|
| 906-0 Case Supervision | Used on any investigation to track the progress of that investigation. |
| 906-1 Any Fire | Used on any fire investigation to collect identification and contact information. |
| 906-2 Structure Fire | Used when the fire involves a structure. There are three pages to this form. |
| 906-3 Motor Vehicle | Used when the fire involves any type of motor vehicle. |
| 906-4 Wildland Fire | Used when the fire involves grass, brush, and wildland areas. |
| 906-5 Casualty | Used to collect information on any person injured or killed in the incident. |
| 906-6 Witness Statement | Used to identify a witness and record their statement (one sheet per witness). |
| 906-7 Evidence | Used to record recovered evidence and where it is sent or being stored. |
| 906-8 Photograph | Used to log a description of each photograph taken. |
| 906-9 Sketch | Used to sketch the scene or specific locations within the scene. |
| 906-10 Insurance Information | Used to record information on insurance coverage, adjustment, and loss. |
| 906-11 Records/Documents | Used to record information on incident, property, and business or personal records that are available. |

2-2.1 Case Supervision Field Notes (Form 906-0). The case supervision form shown in Figure 2-2.1(a) is designed to be the cover sheet for the package of information that will result after a fire is recorded.

This cover sheet will assist in keeping track of the progress of the investigation. The remarks section should be used to indicate what has been done or needs to be done, assignments, dates, and so forth. The lower portion can be used to record routine checks or rechecks and other information pertinent to the investigation.

The department or agency conducting the investigation as well as the file number assigned to the investigation should be recorded on the upper right corner of each sheet or form used.

The section entitled Field Notes should be used to indicate

which forms are being used and, therefore, should be part of the final package. If a particular form is not applicable (N/A) to the fire being investigated, check the N/A box so that other investigators or supervisors realize that the form is purposely not present, rather than potentially lost. For example, the motor vehicle form (906-3) and the wildland fire form (906-4) would not be applicable to a structure fire.

Use the back side of the form or additional sheets of paper to record additional dates and remarks.

The date and activity spaces are to record various aspects of the investigation as it continues. As shown in Form 2-2.1(b), the evidence was taken to the lab on May 27, 1993, and the lab results are recorded in the activity section. Each investigator should utilize this space for any notes that could be pertinent to the investigation.

| CASE SUPERVISION FIELD NOTES 906-0 | | AGENCY State Police | FILE NUMBER 1234-93 |
|--|---|---|--------------------------------------|
| This cover sheet will assist in keeping track of the progress of the investigation. Indicate what has been done, what needs to be done, assignments, dates, and so forth, in the Remarks sections. The lower portion should be used to record routine checks or rechecks and other information pertinent to the investigation. | | | |
| FIELD NOTES FORMS | | | |
| ANY FIRE 906-1 | <input checked="" type="checkbox"/> COMPLETE <u>5/26/93</u> DATE | <input type="checkbox"/> N/A | REMARKS |
| STRUCTURE 906-2 | <input checked="" type="checkbox"/> COMPLETE <u>5/26/93</u> DATE | <input type="checkbox"/> N/A | REMARKS |
| VEHICLE 906-3 | <input type="checkbox"/> COMPLETE _____ DATE | <input checked="" type="checkbox"/> N/A | REMARKS |
| WILDLAND 906-4 | <input type="checkbox"/> COMPLETE _____ DATE | <input checked="" type="checkbox"/> N/A | REMARKS |
| CASUALTY 906-5 | <input type="checkbox"/> COMPLETE _____ DATE | <input checked="" type="checkbox"/> N/A | REMARKS |
| WITNESS 906-6 | <input checked="" type="checkbox"/> COMPLETE <u>5/25/93</u> DATE | <input type="checkbox"/> N/A | REMARKS |
| EVIDENCE 906-7 | <input checked="" type="checkbox"/> COMPLETE <u>6/10/93</u> DATE | <input type="checkbox"/> N/A | REMARKS |
| PHOTOGRAPH 906-8 | <input checked="" type="checkbox"/> COMPLETE <u>5/27/93</u> DATE | <input type="checkbox"/> N/A | REMARKS |
| SKETCH 906-9 | <input checked="" type="checkbox"/> COMPLETE <u>5/25/93</u> DATE | <input type="checkbox"/> N/A | REMARKS |
| INSURANCE 906-10 | <input checked="" type="checkbox"/> COMPLETE <u>6/15/93</u> DATE | <input type="checkbox"/> N/A | REMARKS <u>6/10 LFJ to follow up</u> |
| RECORDS/DOCUMENT 906-11 | <input checked="" type="checkbox"/> COMPLETE <u>5/27/93</u> DATE | <input type="checkbox"/> N/A | REMARKS |
| INCIDENT AND CASUALTY REPORTS UPDATED <input checked="" type="checkbox"/> YES <u>6/15/93</u> DATE <input type="checkbox"/> NO <input type="checkbox"/> NOT NECESSARY | | | |
| DATE | ACTIVITY | BY | |
| 5/27/93 | Evidence to lab. LFJ | | |
| 6/2/93 | Lab results back. No flammable liquid present. LFJ | | |
| 6/15/93 | Insurance co. paying claim. CEP | | |
| 6/25/93 | Evidence destroyed per policy. LFJ | | |
| | | | |

Figure 2-2.1(b) Example of a case supervision form.

| | | | | | | | | |
|--------------------------------------|--|--|--|--|---------------|--|--------------------|--|
| ANY FIRE FIELD NOTES 906-1 | | | | | AGENCY | | FILE NUMBER | |
|--------------------------------------|--|--|--|--|---------------|--|--------------------|--|

| | | | | | | | | |
|--------------------------------|---|---|--|--|-----------------------------------|-------|-----------|-------------------------|
| INCIDENT | | | | | | | | |
| ADDRESS/LOCATION | | | | | DAY | DATE | TIME | FIRE DEPT. INCIDENT NO. |
| WEATHER AT TIME OF FIRE | GENERAL CONDITIONS | | | | | TEMP. | WIND DIR. | WIND SPEED |
| PROPERTY DESCRIPTION | STRUCTURE (906-2) <input type="checkbox"/> | VEHICLE (906-3) <input type="checkbox"/> | WILDLAND (906-4) <input type="checkbox"/> | | OTHER <input type="checkbox"/> | | | |

| | | | | | | | | |
|-----------------------|--|--|--|--|--|--|-----------|--|
| OWNER/OCCUPANT | | | | | | | | |
| OWNER'S NAME | | | | | | | PHONE NO. | |
| OWNER'S ADDRESS | | | | | | | | |
| OCCUPANT'S NAME | | | | | | | PHONE NO. | |
| OCCUPANT'S ADDRESS | | | | | | | | |
| DOING BUSINESS AS | | | | | | | PHONE NO. | |

| | | | | | | | | |
|---------------------------------------|-----------|------|---|---|---|--|------------------|--|
| NOTIFICATION FOR INVESTIGATION | | | | | | | | |
| DAY | DATE | TIME | FROM WHOM | | | | | |
| RECEIVED BY | | | | | ASSIGNED TO | | | |
| ARRIVED AT SCENE | DAY | DATE | TIME | SCENE SECURED <input type="checkbox"/> NO (COMMENT ON CONDITION) <input type="checkbox"/> YES (BY WHOM): | | | | |
| AUTHORITY TO ENTER | EMERGENCY | | CONSENT <input type="checkbox"/> VERBAL <input type="checkbox"/> WRITTEN | | WARRANT <input type="checkbox"/> ADMIN. <input type="checkbox"/> CRIM. | | OTHER (Describe) | |
| DEPARTED SCENE | DAY | DATE | TIME | COMMENTS | | | | |

| | | | |
|--------------------------------|--------------|----------------|-----------|
| OTHER AGENCIES INVOLVED | | | |
| FIRE DEPT. | INCIDENT NO. | CONTACT PERSON | PHONE NO. |
| POLICE DEPT. | FILE NO. | CONTACT PERSON | PHONE NO. |
| OTHER | CASE NO. | CONTACT PERSON | PHONE NO. |

| | |
|-----------------------------|--------------|
| ESTIMATED TOTAL LOSS | |
| \$ | ESTIMATED BY |

| |
|----------------|
| REMARKS |
| |
| |
| |
| |
| |
| |
| |

Figure 2-2.2(a) Any fires field notes (Form 906-1).

2-2.2 Any Fire Field Notes (Form 906-1). The any fire form shown in Figure 2-2.2(a) is divided into six sections. As with all forms used, the agency name and file number should be entered in the upper right corner.

The first section identifies the incident, including the address where the incident occurred or the general location; the day, date, and time of the incident; and any fire department incident number. The weather description should be general, but the temperature, wind direction, and wind speed should be as exact as possible. The property description should indicate whether the incident is primarily a structure, vehicle, wildland, or other fire. The appropriate form should also be attached. [See Figure 2-2.2(b).]

| INCIDENT | | | | | |
|--|--|---|--|-----------------------------------|--------------------------------|
| ADDRESS/LOCATION 6478 Smithton Dr., Anytown | | DAY Mon. | DATE 5/24/93 | TIME 1143 | FIRE DEPT. INCIDENT NO. 206 |
| WEATHER AT TIME OF FIRE | GENERAL CONDITIONS Clear, cold | | | | |
| TEMP 47° F | WIND DIR NW | WIND SPEED 5 | | | |
| PROPERTY DESCRIPTION | STRUCTURE (M-2) <input checked="" type="checkbox"/> | VEHICLE (M-3) <input type="checkbox"/> | WILDLAND (M-4) <input type="checkbox"/> | OTHER <input type="checkbox"/> | |

Figure 2-2.2(b) Example of the incident section of any fire form.

The second section is for recording the owner and the occupant. List the owner's name, telephone number, and address. If the occupant's name and address are different from the owner's name and address, list those as well. For a business, the name of the business and its telephone number should be recorded on the line "Doing business as." [See Figure 2-2.2(c).]

| OWNER/OCCUPANT | |
|---|-----------------------|
| OWNER'S NAME John Ayres | PHONE NO. 639-4728 |
| OWNER'S ADDRESS 6478 Smithton Dr., Anytown, NY 49702 | |
| OCCUPANT'S NAME Same | PHONE NO. |
| OCCUPANT'S ADDRESS | |
| DOING BUSINESS AS N/A | PHONE NO. |

Figure 2-2.2(c) Example of the owner/occupant section of an any fire form.

The third section is to identify how the investigative agency was notified and when and to whom the case was assigned. All the information relates to when the investigator was notified. In the example in Figure 2-2.2(d), on Monday, May 24, 1993, at 1430 hours, Chief Jones contacted Rogers, who assigned the case to Fahey. The form then shows the arrival time of the investigator at the scene, whether the scene was secured or not, and, in this scenario, the fact it was found in the same condition as it was left by the fire department. The authority to enter was written. The date and time that the investigator departed the scene is also recorded.

| NOTIFICATION FOR INVESTIGATION | | | | | |
|--------------------------------|---|---|---|--------------------|--|
| DAY Mon. | DATE 5/24/93 | TIME 1430 | FROM WHOM Chief W. Jones | | |
| RECEIVED BY Rogers | | | ASSIGNED TO Fahey | | |
| ARRIVED AT SCENE Tues. | DATE 5/25/93 | TIME 0910 | SCENE SECURED <input type="checkbox"/> NO <input type="checkbox"/> YES (BY WHOM): | Same as left by FD | |
| AUTHORITY TO ENTER | EMERGENCY <input type="checkbox"/> VERBAL <input checked="" type="checkbox"/> WRITTEN | CONSENT <input type="checkbox"/> VERBAL <input checked="" type="checkbox"/> WRITTEN | WARRANT <input type="checkbox"/> ADMIN. <input type="checkbox"/> CRIM. | OTHER (Describe) | |
| DEPARTED SCENE Tues. | DATE 5/25/93 | TIME 1500 | COMMENTS | | |

Figure 2-2.2(d) Example of the notification for investigation section of an any fire form.

The fourth section identifies other agencies that were contacted as part of the investigation. In this case, Chief Jones of the Clio Fire Department and Patrolman Smith of the Vienna Police Department were involved. [See Figure 2-2.2(e).]

| OTHER AGENCIES INVOLVED | | | |
|-------------------------|---------------------|----------------------------------|-----------------------|
| FIRE DEPT. Clio | INCIDENT NO. 206 | CONTACT PERSON Chief W. Jones | PHONE NO. 687-2347 |
| POLICE DEPT. Vienna | FILE NO. 93-916 | CONTACT PERSON Patman Smith | PHONE NO. 732-1111 |
| OTHER | CASE NO. | CONTACT PERSON | PHONE NO. |

Figure 2-2.2(e) Example of the other agencies involved section of any fire form.

The fifth section provides a space to estimate the total loss and indicate who made the estimate. Additional information on the loss can be recorded in the remarks section. [See Figure 2-2.2(f).] Also note that the insurance information form (Form 906-10) has space for recording information on the insurance loss paid.

| ESTIMATED TOTAL LOSS | |
|----------------------|-----------------------------|
| \$ 35,000 | ESTIMATED BY Chief Jones |

Figure 2-2.2(f) Example of the estimated total loss section of an any fire form.

The final section of the any fire form is the remarks section. This section can be used as necessary to record any additional details the user feels are relevant to the investigation. [See Figure 2-2.2(g).]

| REMARKS |
|---|
| Property was turned over to John Ayres, owner, at 1500 hrs., 5/24/93. John Ayres gave permission to Fahey to enter property to conduct investigation. |
| |
| |
| |

Figure 2-2.2(g) Example of the remarks section of an any fire form.

| | | |
|---|--------|-------------|
| STRUCTURE FIRE FIELD NOTES 906-2a | AGENCY | FILE NUMBER |
|---|--------|-------------|

| | |
|---------------------------------------|----------|
| TYPE AND STATUS | |
| PROPERTY USE | |
| STATUS (OCCUPIED, UNOCCUPIED, VACANT) | COMMENTS |

| | |
|--|--|
| AREA DESCRIPTION | |
| <input type="checkbox"/> RURAL <input type="checkbox"/> FARM <input type="checkbox"/> URBAN <input type="checkbox"/> SUBURBAN <input type="checkbox"/> OTHER _____ | |
| <input type="checkbox"/> ZONED <input type="checkbox"/> UNZONED <input type="checkbox"/> IMPROVING <input type="checkbox"/> DECLINING <input type="checkbox"/> STABLE <input type="checkbox"/> OTHER _____ | |

| | | | | |
|--|----------------|----------------|--------|------|
| CONSTRUCTION | | | | |
| FOUNDATION <input type="checkbox"/> SLAB <input type="checkbox"/> CRAWL SPACE <input type="checkbox"/> BASEMENT(S) <input type="checkbox"/> OTHER _____ | | | | |
| DIMENSIONS _____ FT LENGTH _____ FT WIDTH _____ FT HEIGHT _____ STORIES _____ NO. UNITS | | | | |
| TYPE OF CONSTRUCTION | EXTERIOR WALLS | INTERIOR WALLS | FLOORS | ROOF |

| | |
|---|--|
| SECURITY (Time of Fire) | |
| DOORS <input type="checkbox"/> SECURE <input type="checkbox"/> NOT SECURE PER: _____ | |
| WINDOWS <input type="checkbox"/> SECURE <input type="checkbox"/> NOT SECURE PER: _____ | |
| OTHER <input type="checkbox"/> SECURE <input type="checkbox"/> NOT SECURE PER: _____ | |
| COMMENTS ON SECURITY | |

| | | |
|---|----------------|-----------|
| ALARM/PROTECTION SYSTEMS | | |
| ALARMS <input type="checkbox"/> YES <input type="checkbox"/> NO | TYPE ALARM | |
| ALARM COMPANY | CONTACT PERSON | PHONE NO. |
| COMMENTS | | |
| PROTECTION SYSTEMS <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> OPERATED <input type="checkbox"/> DID NOT OPERATE | | COMMENTS |
| DESCRIPTION OF SYSTEM(S) | | |
| | | |

| | | | | |
|---------------------------------|--|----------------------|---------|-----------|
| UTILITIES (Time of Fire) | | | | |
| ELECTRIC | <input type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME | CONTACT | PHONE NO. |
| GAS | <input type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME | CONTACT | PHONE NO. |
| WATER | <input type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME | CONTACT | PHONE NO. |
| PHONE | <input type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME | CONTACT | PHONE NO. |
| OTHER | <input type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME | CONTACT | PHONE NO. |

Figure 2-2.3(a) Structure fire field notes (Forms 906-2a, 2b, and 2c).

| | | |
|---|--------|-------------|
| STRUCTURE FIRE FIELD NOTES 906-2b | AGENCY | FILE NUMBER |
|---|--------|-------------|

| | |
|------------------------------|--|
| EXTERIOR OBSERVATIONS | |
| | |
| | |

| | |
|------------------------------|--|
| INTERIOR OBSERVATIONS | |
| | |
| | |

| | | |
|-----------------------|----------|--|
| HEATING SYSTEM | | |
| TYPE | LOCATION | |
| COMMENTS | | |
| | | |

| | | | |
|--|----------------|------------------------|--|
| ELECTRICAL SERVICE | | | |
| <input type="checkbox"/> FUSES <input type="checkbox"/> BREAKERS | ENTRY LOCATION | SERVICE PANEL LOCATION | |
| COMMENTS | | | |
| | | | |

| | | |
|--------------------------------|----------|--|
| OTHER HEATING EQUIPMENT | | |
| TYPE(S) | LOCATION | |
| COMMENTS | | |
| | | |

| | |
|---------------------------|--|
| STRUCTURE CONTENTS | |
| | |
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| | |
|-----------------------|--|
| AREA OF ORIGIN | |
| | |
| | |
| | |

Figure 2-2.3(a) Continued.

| STRUCTURE FIRE FIELD NOTES 906-2c | | AGENCY | FILE NUMBER |
|--------------------------------------|-------|------------|-------------|
| IGNITION SEQUENCE | | | |
| HEAT SOURCE | | | |
| MATERIAL IGNITED | | | |
| IGNITION FACTOR | | | |
| IF EQUIPMENT INVOLVED | | | |
| MAKE | MODEL | SERIAL NO. | |
| COMMENTS | | | |
| | | | |
| | | | |
| FIRE SPREAD | | | |
| MATERIALS | | | |
| AVENUES | | | |
| COMMENTS | | | |
| | | | |
| | | | |
| SMOKE SPREAD | | | |
| MATERIALS | | | |
| AVENUES | | | |
| COMMENTS | | | |
| | | | |
| | | | |
| REMARKS | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Figure 2-2.3(a) Continued.

2-2.3 Structure Fire Field Notes (Forms 906-2a, 2b, and 2c). There are three sheets that comprise the form used when the incident under investigation is a structure fire. These three sheets, shown in Figure 2-2.3(a), are divided into 17 sections, each of which is described in the following sections. Be sure the agency name and file number are recorded at the upper right corner of each of the three sheets.

The first section deals with the type or use of the property and its status. In the example shown in Figure 2-2.3(b), the structure is an occupied single-family, residential building. Occupied, for purposes of fire reporting, means that it is being used regularly, even if there were not people present at the time of the fire. If the property is not occupied, then its current status — i.e., under construction or renovation, idle, or abandoned — should be recorded.

| TYPE AND STATUS | |
|---|--|
| PROPERTY USE Single-family dwelling | |
| STATUS (OCCUPIED, UNOCCUPIED, VACANT) Occupied | COMMENTS Owner not at home at time of fire. |

Figure 2-2.3(b) Example of the type and status section of a structure fire form.

The second section provides a general area description. As many boxes as appropriate can be checked. In the example shown in Figure 2-2.3(c), the fire occurred in a zoned, stable suburban area.

| AREA DESCRIPTION | |
|--|--|
| <input type="checkbox"/> RURAL <input type="checkbox"/> FARM <input type="checkbox"/> URBAN <input checked="" type="checkbox"/> SUBURBAN <input type="checkbox"/> OTHER | |
| <input checked="" type="checkbox"/> ZONED <input type="checkbox"/> UNZONED <input type="checkbox"/> IMPROVING <input type="checkbox"/> DECLINING <input checked="" type="checkbox"/> STABLE <input type="checkbox"/> OTHER | |

Figure 2-2.3(c) Example of the area description section of a structure fire form.

The third section describes the construction of the structure. In the example shown in Figure 2-2.3(d), the structure was a 50 ft × 32 ft, one-story used as one unit. The structure had a basement and was of wood-frame construction with drywall interior walls, plywood floors, and a composition shingled roof.

| CONSTRUCTION | | | | |
|---|----------------|----------------|---------------|------|
| FOUNDATION <input type="checkbox"/> SLAB <input type="checkbox"/> CRAWL SPACE <input checked="" type="checkbox"/> BASEMENT(S) <input type="checkbox"/> OTHER | | | | |
| DIMENSIONS 50 FT LENGTH 32 FT WIDTH 1 FT HEIGHT 1 STORIES 1 NO. UNITS | | | | |
| TYPE OF CONSTRUCTION | EXTERIOR WALLS | INTERIOR WALLS | FLOORS | ROOF |
| Wood frame | Drywall | Plywood | Comp. shingle | |

Figure 2-2.3(d) Example of the construction section of a structure fire form.

The next section records the security of the structure as found by the fire department upon its arrival. In the example shown in Figure 2-2.3(e), the doors and the windows were secure according to Assistant Chief White. The rear door was forced by the fire department upon arrival at the scene.

| SECURITY (Time of Fire) | |
|---|------------------------|
| DOORS <input checked="" type="checkbox"/> SECURE <input type="checkbox"/> NOT SECURE | PER: Asst. Chief White |
| WINDOWS <input checked="" type="checkbox"/> SECURE <input type="checkbox"/> NOT SECURE | PER: Asst. Chief White |
| OTHER <input type="checkbox"/> SECURE <input type="checkbox"/> NOT SECURE | PER: |
| COMMENTS ON SECURITY Ladder company forced rear door on arrival. | |

Figure 2-2.3(e) Example of the security section of a structure fire form.

The section on alarm/protection systems is for recording data on any alarm system or fire suppression or detection system in the structure. The alarm system can be for fire, burglary, or motion. The operation of any system should be investigated and recorded.

The example in Figure 2-2.3(f) shows a sprinkler system tied into an alarm company.

| ALARM/PROTECTION SYSTEMS | | |
|---|---|-----------------------|
| ALARMS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | TYPE ALARM Wired system to ABC Alarm Co. | |
| ALARM COMPANY ABC Alarm | CONTACT PERSON Joe Hillberg | PHONE NO. 796-4286 |
| COMMENTS Alarm received at 1647 hrs. | | |
| PROTECTION SYSTEMS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> OPERATED <input type="checkbox"/> DID NOT OPERATE | COMMENTS 5 sprinklers opened | |
| DESCRIPTION OF SYSTEM(S) Wet pipe system throughout property | | |

Figure 2-2.3(f) Example of the alarm/protection systems section of a structure fire form.

The utilities section allows the investigator to list whether the utilities were on or off at the time of the fire. It also provides a place to list the utility companies and their telephone numbers. [See Figure 2-2.3(g).]

| UTILITIES (Time of Fire) | | | |
|--------------------------|---|---|----------------------|
| ELECTRIC | <input checked="" type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME Consumers G&E | CONTACT PHONE NO. |
| GAS | <input checked="" type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME Consumers G&E | CONTACT PHONE NO. |
| WATER | <input checked="" type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME Anytown Water Co. | CONTACT PHONE NO. |
| PHONE | <input type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME | CONTACT PHONE NO. |
| OTHER | <input type="checkbox"/> ON <input type="checkbox"/> OFF | UTILITY COMPANY NAME | CONTACT PHONE NO. |

Figure 2-2.3(g) Example of the utilities section of a structure fire form.

In the section on exterior observations, the investigator should note his or her observations of significant facts about the exterior of the structure or the fire area. Observations reported by others can also be entered here.

In the example shown in Figure 2-2.3(h), the fire department observed fire through the southwest corner of the roof upon its arrival, and the fire investigator noted charring behind the electrical service entrance.

| EXTERIOR OBSERVATIONS | |
|--|--|
| SW corner of roof damaged by fire. Fire had burned through on arrival of FD. Some char damage to wall in area of service entrance. | |

Figure 2-2.3(h) Example of the exterior observations section of a structure fire form.

In the section on interior observations, the investigator should note his or her observations of significant facts about the interior of the structure or the fire area. Observations by others can be entered here also.

In the example shown in Figure 2-2.3(i), the investigator found heavy smoke damage throughout the structure and major fire damage centered in the utility room at the southwest

corner of the building. Piles of burned clothing were found behind the clothes dryer.

| INTERIOR OBSERVATIONS | |
|---|--|
| Major fire damage in utility room. Heavy smoke throughout building. Burned clothing behind clothes dryer. | |

Figure 2-2.3(i) Example of the interior observations section of a structure fire form.

The section entitled Heating System is designed to record observations about the principal heating system for the structure. For example, in Figure 2-2.3(j) the heating system is gas-fired forced hot air and is located in the basement. There is no fire damage in the basement.

| HEATING SYSTEM | |
|------------------------------------|----------------------|
| TYPE Gas – forced hot air | LOCATION Basement |
| COMMENTS No damage in basement. | |

Figure 2-2.3(j) Example of the heating system section of a structure fire form.

The next section discusses the electrical service. The investigator can record where the service enters the structure, the location of the service panel, and any observations about the electrical service and its relationship to the fire.

For example, in Figure 2-2.3(k) the electrical service consisted of a circuit breaker box in the southwest corner of the utility room, and there was a 20-amp breaker that had tripped during the fire.

| ELECTRICAL SERVICE | |
|--|-----------------------------|
| <input type="checkbox"/> FUSES <input checked="" type="checkbox"/> BREAKERS | ENTRY LOCATION SW corner |
| SERVICE PANEL LOCATION Utility room | |
| COMMENTS Main disconnect found off – FD turned off. 20-amp breaker tripped – feeds utility room. | |

Figure 2-2.3(k) Example of the electrical service section of a structure fire form.

If there were any auxiliary heating systems or equipment in the fire area that could have been involved in any way, their type, location, and any observations about their possible involvement should be recorded in the Other Heating Equipment section.

In the example shown in Figure 2-2.3(l), an electric space heater was found plugged in the utility room, and it was severely damaged.

| OTHER HEATING EQUIPMENT | |
|--|--------------------------------|
| TYPE(S) Electric space heater | LOCATION Utility room floor |
| COMMENTS Plugged in and severely damaged. | |

Figure 2-2.3(l) Example of the other heating equipment section of a structure fire form.

Observations about the contents of a structure are often helpful in understanding the fire. The next section enables the investigator to record anything unusual about the contents

of the structure. If there are no unusual observations, the investigator should so indicate. [See Figure 2-2.3(m).]

| STRUCTURE CONTENTS | |
|--|--|
| COMMENTS Normal to occupancy – appeared to be in order. | |

Figure 2-2.3(m) Example of the structure contents section of a structure fire form.

The next section is for recording either the area of origin or observations that could be helpful in determining the area of origin. [See Figure 2-2.3(n).]

| AREA OF ORIGIN | |
|---|--|
| COMMENTS Utility room at floor level near electric space heater. | |

Figure 2-2.3(n) Example of the area of origin section of a structure fire form.

The section on ignition sequence might not be able to be completed until some time late in the investigation. The reasons for investigations vary, and, in some, the ignition sequence can be immediately known, but, in others, factors such as fire spread or reasons for casualties can be the thrust of the investigation.

The ignition sequence should identify a heat source, a material ignited, and what could have brought the two together to allow the fire to start. The heat source often involves a piece of equipment. If so, the equipment should be identified and it should be stated how the equipment contributed to the heat. If no equipment was involved, the form of the heat should still be identified.

The material ignited should be identified by both its type or composition and its form or use. The explanation of how the heat and material combined is described as the ignition factor.

In the example shown in Figure 2-2.3(o), the investigator records what he or she believes happened.

| IGNITION SEQUENCE | | |
|---|----------------|------------------------|
| HEAT SOURCE Radiant heat from electric heater. | | |
| MATERIAL IGNITED Cotton and synthetic clothing. | | |
| IGNITION FACTOR Clothing disturbed by cat – fell on heater. | | |
| IF EQUIPMENT INVOLVED | | |
| MAKE Acme | MODEL DL-62 | SERIAL NO. 1X549764 |
| COMMENTS Believe family cat knocked clothing from a shelf above electric heater onto heater. Clothing ignited when heater came on. | | |

Figure 2-2.3(o) Example of the ignition sequence section of a structure fire form.

The section entitled Fire Spread can be used to describe how the fire moved through the structure. If certain materials were instrumental in the spread, they should be noted. If certain avenues or paths allowed the fire to spread to other

sections of the structure, they should also be noted. It is suggested that when the fire leaves the room of origin, the extent of the fire damage should be documented.

In the example shown in Figure 2-2.3(p), the fire investigator found that the wood paneling used as interior finish in the corridor was extremely important in enabling the fire to spread and cutting off the escape routes for other residents.

| FIRE SPREAD | |
|-------------|--|
| MATERIALS | 3/16-in. prefinished plywood on corridor walls |
| AVENUES | Corridor on 2nd story |
| COMMENTS | Fire from room of origin travelled down corridor on wall finish, cutting off egress. |
| | |

Figure 2-2.3(p) Example of the fire spread section of a structure fire form.

The section entitled Smoke Spread is similar to the section entitled Fire Spread but allows for the recording of information about the smoke’s movement through the building. Again, any materials that produced significant smoke while burning should be recorded. Also, any significant avenues or structural areas that were significant in allowing the smoke to spread uncontrolled should be noted.

In the example shown in Figure 2-2.3(q), a burning plastic shower unit in a bathroom on the third story forced smoke into a ventilation shaft from which it spread to other apart-

ments when the fan that ventilated the shaft shut down due to a power failure during the fire.

| SMOKE SPREAD | |
|--------------|---|
| MATERIALS | Plastic bathtub on third story (Apt. 317) |
| AVENUES | Bathroom ventilation shaft |
| COMMENTS | Shaft is normally exhausted by fan on roof. Fan shut down due to electric failure. Smoke entered other apartments from shaft. |
| | |

Figure 2-2.3(q) Example of the smoke spread section of a structure fire form.

Any remarks that the investigator feels are necessary to this particular portion of the investigation can be recorded in the remarks section. If remarks are entered at different times, the date when they are entered should be included. [See Figure 2-2.3(r).]

| REMARKS | |
|---------|---|
| | Fire department moved clothes washer and dryer during overhaul. |
| | They do not appear to have been involved. Char damage in wall and roof area appears to be as a result of the fire growth. |
| | |
| | |
| | |
| | |

Figure 2-2.3(r) Example of the remarks section of a structure fire form.

| | | | | | | | |
|---|--|--|--|--------|--|-------------|--|
| MOTOR VEHICLE FIELD NOTES 906-3 | | | | AGENCY | | FILE NUMBER | |
|---|--|--|--|--------|--|-------------|--|

| | | | | | | |
|----------------------------|------|------|-------|-------------------------------|--|---------|
| VEHICLE DESCRIPTION | | | | | | |
| COLOR(S) | YEAR | MAKE | MODEL | LICENSE — NO., STATE, EXPIRES | | VIN NO. |

| | | | |
|-----------------------------|--|--------------------|----------------------|
| OWNER/OPERATOR | | | |
| OWNER'S NAME | | OWNER'S ADDRESS | OWNER'S PHONE NO. |
| OPERATOR'S NAME/LICENSE NO. | | OPERATOR'S ADDRESS | OPERATOR'S PHONE NO. |

| | |
|--|-------------|
| EXTERIOR | |
| PRIOR DAMAGE | FIRE DAMAGE |
| TIRES/WHEELS (Missing, Match, Condition) | |
| PARTS MISSING | |

| | | | |
|--------------------|-------------------|----------------------|---------------------|
| FUEL SYSTEM | | | |
| PRIOR DAMAGE | FIRE DAMAGE | | |
| TYPE FUEL | CONDITION OF TANK | FILLER CAP CONDITION | FUEL LINE CONDITION |

| | |
|---|-------------|
| ENGINE COMPARTMENT | |
| PRIOR DAMAGE | FIRE DAMAGE |
| FLUID LEVELS OIL _____ TRANSMISSION _____ RADIATOR _____ OTHER _____ | |
| PARTS MISSING | |

| | |
|---------------------------|---|
| INTERIOR | |
| PRIOR DAMAGE | FIRE DAMAGE |
| IGNITION SYSTEM | KEY IN IGNITION <input type="checkbox"/> YES <input type="checkbox"/> NO |
| PERSONAL CONTENTS MISSING | |
| ACCESSORIES MISSING | |
| ODOMETER READING | SERVICE STICKER INFORMATION |

| | | |
|-------------------------|----------------------|------------------|
| VEHICLE SECURITY | | |
| ALARM | DOOR AND TRUNK LOCKS | WINDOW POSITIONS |

| | |
|---------------------------------|--|
| ORIGIN/IGNITION SEQUENCE | |
| AREA | |
| HEAT SOURCE | |
| MATERIAL IGNITED | |
| IGNITION FACTOR | |

Figure 2-2.4(a) Motor vehicle field notes (Form 906-3).

2-2.4 Motor Vehicle Field Notes (Form 906-3). The motor vehicle form shown in Figure 2-2.4(a) is divided into eight sections. It is to be used whenever the fire investigation centers on a motor vehicle, whether the vehicle is inside or outside a structure. As with any of the forms used, the agency name and file number should be recorded in the upper right corner.

The first section is used to describe the vehicle. It includes the year, make, model, license or registration number, and the vehicle identification number (VIN). The color of the vehicle should also be recorded. [See Figure 2-2.4(b).]

| VEHICLE DESCRIPTION | | | | | |
|---------------------|------|------|--------|-------------------------------|----------------|
| COLOR(S) | YEAR | MAKE | MODEL | LICENSE — NO., STATE, EXPIRES | VIN NO. |
| Red | 87 | Acme | Deluxe | WAA-309 NY 5/93 | WQZX129B476WWR |

Figure 2-2.4(b) Example of the vehicle description section of a motor vehicle form.

The second section is for recording the name, address, and telephone number of the owner of the vehicle and the operator of the vehicle. The operator's license number should also be listed. [See Figure 2-2.4(c).]

| OWNER/OPERATOR | | |
|-----------------------------|----------------------|----------------------|
| OWNER'S NAME | OWNER'S ADDRESS | OWNER'S PHONE NO. |
| John Q. Public | 129 Elm St., Anytown | 748-6293 |
| OPERATOR'S NAME/LICENSE NO. | OPERATOR'S ADDRESS | OPERATOR'S PHONE NO. |
| Same/02976 4287 | | |

Figure 2-2.4(c) Example of the owner/operator section of a motor vehicle form.

The third section allows the investigator to record observations about the exterior of the vehicle. This should include any prior damage or missing or mismatched parts. Any area of exterior fire damage should also be described. [See Figure 2-2.4(d).]

| EXTERIOR | |
|--|-----------------------------|
| PRIOR DAMAGE | FIRE DAMAGE |
| None | Extensive to roof and doors |
| TIRES/WHEELS (Missing, Match, Condition) | |
| Original equipment — fair condition | |
| PARTS MISSING | |
| None | |

Figure 2-2.4(d) Example of the exterior section of a motor vehicle form.

The next section is for recording observations about the fuel systems. Notes in this area should relate to whether there was any damage to the fuel system, whether there was any damage from the fire to the fuel system, the type of fuel the vehicle used, the condition of the tank (if the cap was intact), and whether the fuel line was intact. [See Figure 2-2.4(e).]

| FUEL SYSTEM | | | |
|--------------|-------------------|----------------------|---------------------|
| PRIOR DAMAGE | FIRE DAMAGE | | |
| None | None | | |
| TYPE FUEL | CONDITION OF TANK | FILLER CAP CONDITION | FUEL LINE CONDITION |
| | | | |

Figure 2-2.4(e) Example of the fuel system section of a motor vehicle form.

The fifth section can be used to record observations about the engine compartment. Again, there are various areas of

concern. Was there prior damage to the engine? Was there fire damage to the engine compartment? What were the fluid levels? Were the caps intact? Were any engine parts missing? [See Figure 2-2.4(f).]

| ENGINE COMPARTMENT | |
|--------------------|--------------|
| PRIOR DAMAGE | FIRE DAMAGE |
| None | None |
| FLUID LEVELS | |
| OIL | TRANSMISSION |
| RADIATOR | OTHER |
| PARTS MISSING | |

Figure 2-2.4(f) Example of the engine compartment section of a motor vehicle form.

The sixth section of the form is used to record observations about the interior of the vehicle. Was there prior damage to the interior, the ignition system, or accessories? Were the keys in the ignition? Is anything missing? The fire damage should be described. Also, the odometer reading and any service sticker information should be recorded. [See Figure 2-2.4(g).]

| INTERIOR | |
|---------------------------|---|
| PRIOR DAMAGE | FIRE DAMAGE |
| None | Extensive |
| IGNITION SYSTEM | KEY IN IGNITION |
| Intact — Damaged by fire. | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| PERSONAL CONTENTS MISSING | |
| None | |
| ACCESSORIES MISSING | |
| None | |
| ODOMETER READING | SERVICE STICKER INFORMATION |
| 59,786 | |

Figure 2-2.4(g) Example of the interior section of a motor vehicle form.

The security of the vehicle at the time of the fire can be critical to understanding the fire. The next section allows recording of information about the vehicle's security system. If there was an alarm, was it turned on? Were the doors and trunk locked? What position were the windows in? [See Figure 2-2.4(h).]

| VEHICLE SECURITY | |
|------------------|----------------------|
| ALARM | DOOR AND TRUNK LOCKS |
| None | Intact |
| | WINDOW POSITIONS |
| | Driver's open |

Figure 2-2.4(h) Example of the vehicle security section of a motor vehicle form.

The final section on this form is the origin and ignition sequence section. It can be used to record observations about heat sources, equipment, materials ignited, and possible reasons for the heat and material to combine to start a fire. The ignition sequence might be readily apparent or the investigator might need to use the observations together with other evidence to actually determine how the fire started. [See Figure 2-2.4(i).]

| ORIGIN/IGNITION SEQUENCE | |
|--|--|
| AREA | |
| Rear seat | |
| HEAT SOURCE | |
| Believed cigarette | |
| MATERIAL IGNITED | |
| Seat covering and foam plastic padding | |
| IGNITION FACTOR | |
| Discarded smoking material | |

Figure 2-2.4(i) Example of the origin/ignition sequence section of a motor vehicle form.

| | | | |
|---|--|--------|-------------|
| <b style="font-size: 1.2em;">WILDLAND FIRE FIELD NOTES 906-4 | | AGENCY | FILE NUMBER |
|---|--|--------|-------------|

| | | | |
|---|--|---------------------------|--|
| PROPERTY DESCRIPTION | | | |
| | | | |
| | | | |
| FIRE DAMAGE <input type="checkbox"/> LESS THAN ACRE _____ NO. ACRES | | OTHER PROPERTIES INVOLVED | |
| SECURITY <input type="checkbox"/> OPEN <input type="checkbox"/> FENCED <input type="checkbox"/> LOCKED GATES | | COMMENTS | |

| | | |
|---|---|----------|
| FIRE TRAVEL FACTORS | | |
| TYPE FIRE <input type="checkbox"/> GROUND <input type="checkbox"/> CROWN | FACTORS <input type="checkbox"/> WIND <input type="checkbox"/> TERRAIN | COMMENTS |
| | | |
| | | |

| | |
|-----------------------|--|
| AREA OF ORIGIN | |
| | |
| | |
| | |

| | |
|---|----------|
| PEOPLE IN AREA | |
| AT TIME OF FIRE <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNDETERMINED | COMMENTS |
| | |

| | | |
|--------------------------|-------|------------|
| IGNITION SEQUENCE | | |
| HEAT OF IGNITION | | |
| MATERIAL IGNITED | | |
| IGNITION FACTOR | | |
| IF EQUIPMENT INVOLVED | | |
| MAKE | MODEL | SERIAL NO. |
| COMMENTS | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Figure 2-2.5(a) Wildland fire field notes (Form 906-4).

2-2.5 Wildland Fire Field Notes (Form 906-4). When the fire involves wildland areas, forest, or grasslands, the wildland fire form shown in Figure 2-2.5(a) is helpful in recording observations about the fire. The form is divided into five sections. Start by recording the agency name and file number in the upper right corner.

The first section is for describing the property involved as well as the number of acres involved, other property that the fire spread to, type of security, and any further comments. [See Figure 2-2.5(b).]

| PROPERTY DESCRIPTION | |
|---|--|
| Hilly terrain – some covered with brush 5-8 ft. tall. Remainder wooded with mixed hardwoods. | |
| FIRE DAMAGE <input type="checkbox"/> LESS THAN ACRE <u>15</u> NO. ACRES | OTHER PROPERTIES INVOLVED <u>None</u> |
| SECURITY <input checked="" type="checkbox"/> OPEN <input type="checkbox"/> FENCED <input type="checkbox"/> LOCKED <input type="checkbox"/> GATES | COMMENTS |

Figure 2-2.5(b) Example of the property description section of a wildland fire form.

The second section allows the investigator to record comments and observations about how the fire traveled. This description should include both horizontal and vertical direction as well as speed. Previous weather conditions that would affect the fire's growth and spread should be recorded. [See Figure 2-2.5(c).]

| FIRE TRAVEL FACTORS | |
|--|--|
| TYPE FIRE <input checked="" type="checkbox"/> GROUND <input type="checkbox"/> CROWN | FACTORS <input checked="" type="checkbox"/> WIND <input type="checkbox"/> TERRAIN |
| COMMENTS Wind from SW fanned flame up hillside. | |

Figure 2-2.5(c) Example of the fire travel factors section of a wildland fire form.

The third section is for describing the area of origin. In the early stages of the investigation, this can be a general area that gets narrowed as the investigation continues. [See Figure 2-2.5(d).]

| AREA OF ORIGIN |
|---------------------------------------|
| Open area 1/2 mile off State Route 26 |

Figure 2-2.5(d) Example of the area of origin section of a wildland fire form.

The next section allows the investigator to indicate whether there were people in the area, who they were, and what they were doing. [See Figure 2-2.5(e).] Witness statements should be taken using Form 906-6.

| PEOPLE IN AREA | |
|--|--|
| AT TIME OF FIRE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNDETERMINED | COMMENTS 2 persons hiking in area discovered fire (Steve Fryberg 689-3376). |

Figure 2-2.5(e) Example of the people in area section of a wildland fire form.

The last section is used by the investigator to record observations on heat sources present, materials ignited, and what could have allowed the two to combine to allow the fire to start. These observations can provide a definitive ignition sequence or might need to be used with other information to determine how the fire spread. [See Figure 2-2.5(f).]

| IGNITION SEQUENCE | | |
|--|-------|------------|
| HEAT OF IGNITION <u>Open campfire</u> | | |
| MATERIAL IGNITED <u>Grass, leaves, duff</u> | | |
| IGNITION FACTOR <u>Campfire not properly extinguished</u> | | |
| IF EQUIPMENT INVOLVED MAKE | MODEL | SERIAL NO. |
| COMMENTS Remains of campfire found in area of origin. Probably campers moved on without properly extinguishing the fire. Area is frequently used by hikers and campers. | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Figure 2-2.5(f) Example of the ignition sequence section of a wildland fire form.

| | | | | | | | | | | |
|--------------------------------------|--|--|--|--|---------------|--|--|--------------------|--|--|
| CASUALTY FIELD NOTES 906-5 | | | | | AGENCY | | | FILE NUMBER | | |
|--------------------------------------|--|--|--|--|---------------|--|--|--------------------|--|--|

| | | | | | | | | | | |
|--------------------|-----|-----|---------------|---------|--------|--------|------|-----------|-------|--|
| DESCRIPTION | | | | | | | | | | |
| NAME | | | | ADDRESS | | | | PHONE NO. | | |
| RACE | SEX | AGE | DATE OF BIRTH | | HEIGHT | WEIGHT | HAIR | EYES | OTHER | |
| DESCRIBE CLOTHING | | | | | | | | | | |

| | | | | |
|--|--|--|--|--|
| TYPE OF INJURY | | | | |
| <input type="checkbox"/> MINOR <input type="checkbox"/> MODERATE <input type="checkbox"/> SEVERE <input type="checkbox"/> FATAL DESCRIBE INJURY | | | | |

| | |
|---|--|
| CIRCUMSTANCES | |
| WHO FOUND VICTIM? WHERE? | |
| VICTIM'S ACTIVITY JUST PRIOR TO AND AT TIME OF IGNITION | |
| VICTIM'S ACTIVITY AFTER TIME OF IGNITION | |

| | | |
|---|-----|------------|
| CASUALTY TREATMENT | | |
| <input type="checkbox"/> TREATED AT SCENE BY? | | |
| SENT TO | VIA | TREATED BY |
| REMARKS | | |
| | | |

| | | | | | |
|--------------------------|----------|--|--|---|--|
| FATALITY | | | | | |
| BODY POSITION | | | | | |
| BODY REMOVED TO | | BODY REMOVED BY | | AUTHORITY TO MOVE BODY GIVEN BY | |
| MEDICAL EXAMINER/CORONER | | ADDRESS | | PHONE NO. | |
| CAUSE OF DEATH | | | | | |
| AUTOPSY BY | | ADDRESS | | PHONE NO. | |
| DATE OF AUTOPSY | CASE NO. | BLOOD TEST <input type="checkbox"/> YES <input type="checkbox"/> NO | X-RAYS <input type="checkbox"/> YES <input type="checkbox"/> NO | REPORTS IN POSSESSION <input type="checkbox"/> YES <input type="checkbox"/> NO | |

| | | | |
|-----------------------------------|--|--------------|-------------------|
| NEXT OF KIN | | | |
| NAME | | RELATIONSHIP | ADDRESS AND PHONE |
| NOTIFIED BY (How, Date, and Time) | | | |

| | |
|----------------|--|
| REMARKS | |
| | |

Figure 2-2.6(a) Casualty field notes (Form 906-5).

2-2.6 Casualty Field Notes (Form 906-5). If there are persons killed or injured by the fire, the casualty form can be used to collect data about each of those persons. [See Figure 2-2.6(a).]

The casualty could be a fire fighter, a civilian involved with the property that burned, an emergency service person assisting at the incident, or possibly the suspect in a criminal case. The casualty form is divided into seven sections. If any casualty forms are used, the agency name and file number should be entered at the upper right corner of each form.

The first section of the form is for identifying and describing the casualty. This description includes the name and address, personal features, and clothing worn. In the case of a fire fighter injury, the protective clothing worn, how it was worn, and any failure of the clothing should be described. [See Figure 2-2.6(b).]

| DESCRIPTION | | | | | | | | | |
|--|----------|--------------------------|-----------------------------|----------------|---------------|------------------|------------|-------|--|
| NAME John Smith | | ADDRESS 472 Maple Ct. | | | | PHONE NO. N/A | | | |
| RACE W | SEX M | AGE 87 | DATE OF BIRTH 10/10/1905 | HEIGHT 5'7" | WEIGHT 125 | HAIR W | EYES Bl | OTHER | |
| DESCRIBE CLOTHING Flannel bathrobe and cotton underwear | | | | | | | | | |

Figure 2-2.6(b) Example of the description section of a casualty form.

The second section is used to describe the injury and its seriousness. A minor injury is one in which immediate medical care is not necessary. A moderate injury is one in which quick medical treatment is advisable, but there is little danger of death or permanent disability. A severe injury is potentially life-threatening if the condition remains uncontrolled. Immediate medical care is necessary. [See Figure 2-2.6(c).]

| TYPE OF INJURY | | DESCRIBE INJURY |
|---|-----------------------------------|-----------------|
| <input type="checkbox"/> MINOR | <input type="checkbox"/> MODERATE | |
| <input checked="" type="checkbox"/> FATAL | | Burns and smoke |

Figure 2-2.6(c) Example of the type of injury section of a casualty form.

The third section is used to describe the circumstances surrounding the injury or fatality. This description includes the name of the person who found the victim, where the victim was found, what the victim's activity prior to or at the time of ignition was, and what the victim was doing after the time of ignition. This would be extremely helpful in the case where the casualty was, in fact, the suspect. [See Figure 2-2.6(d).]

| CIRCUMSTANCES | |
|---|--|
| WHO FOUND VICTIM? WHERE? | Jane Yavanonne (daughter) in chair in livingroom |
| VICTIM'S ACTIVITY JUST PRIOR TO AND AT TIME OF IGNITION | Sitting in chair in livingroom, smoking |
| VICTIM'S ACTIVITY AFTER TIME OF IGNITION | None |

Figure 2-2.6(d) Example of the circumstances section of a casualty form.

The section on casualty treatment is not for collecting all the medical details of treatment but rather to identify who handled treatment at the scene and in transport. It also records where the victim was sent. Follow-up inquiries can then be made to determine medical diagnosis or observations that might be helpful to the investigation. [See Figure 2-2.6(e).]

| CASUALTY TREATMENT | | |
|---|-----|------------|
| <input type="checkbox"/> TREATED AT SCENE BY? N/A | | |
| SENT TO | VIA | TREATED BY |
| REMARKS | | |

Figure 2-2.6(e) Example of the casualty treatment section of a casualty form.

If the injury is fatal, it is important to determine in what position and where the victim was found. Also record who authorized the body to be removed, who removed it, and to where. The medical examiner should be identified and any information on cause of death recorded. If an autopsy is performed, the person performing it and the date it was performed should be recorded. Other postmortem tests should also be identified. [See Figure 2-2.6(f).]

| FATALITY | | | |
|---|----------|--|---|
| BODY POSITION Sitting in chair | | | |
| BODY REMOVED TO | | BODY REMOVED BY M. E. Halpin | |
| MEDICAL EXAMINER/CORONER M. E. Halpin | | ADDRESS 1429 Main St., Quincy | PHONE NO. 769-8482 |
| CAUSE OF DEATH Asphyxia from fire products | | | |
| AUTOPSY BY None | | ADDRESS | PHONE NO. |
| DATE OF AUTOPSY | CASE NO. | BLOOD TEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | X-RAYS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| | | REPORTS IN POSSESSION <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | |

Figure 2-2.6(f) Example of the fatality section of a casualty form.

The sixth section identifies the next of kin, who notified them of the death, and when. [See Figure 2-2.6(g).]

| NEXT OF KIN | | |
|---|--------------------------|-------------------------------------|
| NAME Jane Yavanonne | RELATIONSHIP Daughter | ADDRESS AND PHONE 620 S. Elm St. |
| NOTIFIED BY (How, Date, and Time) N/A - Daughter discovered body | | |

Figure 2-2.6(g) Example of the next of kin section of a casualty form.

The final section is a remarks section where the investigator can record any comments specific to the casualty. [See Figure 2-2.6(h).]

| REMARKS |
|---|
| Appears John Smith fell asleep while smoking and cigarette ignited clothing/chair. Fire self-extinguished in chair. |

Figure 2-2.6(h) Example of the remarks section of a casualty form.

The example in Figure 2-2.7(b) shows a typical series of notes taken by an investigator during discussion with John Ayres, owner and occupant of a house in which a fire occurred.

Figure 2-2.7(b) Example of a witness statement form.

2-2.8 Evidence Field Notes (Form 906-7). If evidence is collected at the fire scene, this form can be used to log that evidence. [See Figure 2-2.8(a).]

A description of the evidence, where and when it was found or taken from, and where it was taken to and by whom are recorded in the first section of the form.

At the bottom of the form is a remarks section that can

be used to document the chain of custody, its use, and/or disposition.

In the example shown in Figure 2-2.8(b), three pieces of evidence were taken: an electric heater and debris from two locations. The electric heater was examined at the office, and the debris was sent to a laboratory to determine if flammable liquid vapors were present.

| EVIDENCE FIELD NOTES 906-7 | | AGENCY State Police | FILE NUMBER 1234-93 |
|--|--------------------|------------------------|------------------------|
| DESCRIPTION | WHERE FOUND/WHEN | REMOVED TO/BY | |
| 1. Acme Electric Heater | Utility room floor | Office by Fahey | |
| 2. Debris from near #1 | Utility room floor | Lab by Fahey | |
| 3. Debris from doorway to utility room | | Lab by Fahey | |
| 4. _____ | _____ | _____ | |
| 5. _____ | _____ | _____ | |
| 6. _____ | _____ | _____ | |
| 7. _____ | _____ | _____ | |
| 8. _____ | _____ | _____ | |
| 9. _____ | _____ | _____ | |
| 10. _____ | _____ | _____ | |
| 11. _____ | _____ | _____ | |
| 12. _____ | _____ | _____ | |

| REMARKS |
|--|
| Items #2 and #3 taken to lab for analysis to determine presence of flammable liquid 5/27/93. |
| |
| Item #1 examined in office – found to be on at time of fire 5/27/93. |
| |
| No flammable liquid present per lab report 5/30/93. |
| |
| Item #1 destroyed per policy 6/25/93. |
| |
| |
| |
| |
| |
| |

Figure 2-2.8(b) Example of an evidence form.

| | | | |
|--|----------|--------|-------------|
| PHOTOGRAPH FIELD NOTES 906-8 | ROLL NO. | AGENCY | FILE NUMBER |
| | | | |

*ONLY ONE ROLL OF FILM PER FORM.

| NEG. NO. | DESCRIPTION | NEG. NO. | DESCRIPTION |
|----------|-------------|----------|-------------|
| 1 | | 21 | |
| 2 | | 22 | |
| 3 | | 23 | |
| 4 | | 24 | |
| 5 | | 25 | |
| 6 | | 26 | |
| 7 | | 27 | |
| 8 | | 28 | |
| 9 | | 29 | |
| 10 | | 30 | |
| 11 | | 31 | |
| 12 | | 32 | |
| 13 | | 33 | |
| 14 | | 34 | |
| 15 | | 35 | |
| 16 | | 36 | |
| 17 | | 37 | |
| 18 | | 38 | |
| 19 | | 39 | |
| 20 | | 40 | |

| REMARKS |
|---------|
| |
| |
| |
| |
| |
| |
| |
| |

Figure 2-2.9(a) Photograph field notes (Form 906-8).

2-2.9 Photograph Field Notes (Form 906-8). The form shown in Figure 2-2.9(a) should be used to record a description of each photograph taken at the scene. One form should be used with each roll of film. The roll number, the agency conducting the investigation, and the file number must be recorded in the upper right corner.

The form is designed so that as pictures are taken, the investigator can record, in numerical order, where the pictures were taken and what they show.

The remarks section at the bottom of the form can be used to comment on any photograph, to keep track of the processing, or for any other notes the investigator wishes to make regarding the photographs.

The completed form in Figure 2-2.9(b) shows how a form might look for 22 photographs taken at the scene of a dwelling fire.

| PHOTOGRAPH FIELD NOTES 906-8 | | ROLL NO. 1 | AGENCY State Police | FILE NUMBER 1234-93 |
|---|------------------------------|---------------|-------------------------------------|------------------------|
| *ONLY ONE ROLL OF FILM PER FORM. | | | | |
| NEG. NO. | DESCRIPTION | NEG. NO. | DESCRIPTION | |
| 1 | Ext – South side | 21 | Doorway to util. rm. from kit. | |
| 2 | Ext – East side | 22 | Doorway to util. rm. from util. rm. | |
| 3 | Ext – North side | 23 | | |
| 4 | Ext – West side | 24 | | |
| 5 | Ext – Roof w/hole | 25 | | |
| 6 | Ext – S/S near electric ent. | 26 | | |
| 7 | Int– Utility room– S. wall | 27 | | |
| 8 | Int– Utility room– E. wall | 28 | | |
| 9 | Int– Utility room– N. wall | 29 | | |
| 10 | Int– Utility room– W. wall | 30 | | |
| 11 | Heater | 31 | | |
| 12 | Heater | 32 | | |
| 13 | Floor – Utility room | 33 | | |
| 14 | Kitchen | 34 | | |
| 15 | Livingroom | 35 | | |
| 16 | Bedroom #1 | 36 | | |
| 17 | Bedroom #2 | 37 | | |
| 18 | Bedroom #3 | 38 | | |
| 19 | Cleaned floor – Utility room | 39 | | |
| 20 | Cleaned floor – Utility room | 40 | | |
| REMARKS | | | | |
| To lab for processing 5/27/93 | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Figure 2-2.9(b) Example of a photograph form.

| | | |
|------------------------------------|--------|-------------|
| SKETCH FIELD NOTES 906-9 | AGENCY | FILE NUMBER |
|------------------------------------|--------|-------------|

Scale:

Sketcher:

Date:

NOTE: Be sure to show reference north on sketch.

Figure 2-2.10(a) Sketch field notes (Form 906-9).

2-2.10 Sketch Field Notes (Form 906-9). If a sketch is made of the incident, the form shown in Figure 2-2.10(a) can be used for that purpose. At a major incident, more than one sketch can be necessary, with one showing the overall scene and subsequent sketches showing details of specific sections such as the area of origin.

The sketch should show a north arrow and the point of

origin. Appropriate measurements can be added to clarify understanding.

If the sketch is not to scale, that should be noted. Also, the person drawing the sketch should sign and date the sketch. The example in Figure 2-2.10(b) shows a simple sketch for a one-story dwelling.

| SKETCH FIELD NOTES 906-9 | AGENCY State Police | FILE NUMBER 1234-93 |
|------------------------------------|------------------------|------------------------|
|------------------------------------|------------------------|------------------------|

Scale: None Sketcher: Fahey Date: 5/27/93

NOTE: Be sure to show reference north on sketch.

Figure 2-2.10(b) Example of a sketch form.

| | | | |
|--|--|---------------|--------------------|
| INSURANCE INFORMATION FIELD NOTES 906-10 | | AGENCY | FILE NUMBER |
|--|--|---------------|--------------------|

| | | | |
|----------------|--|----------------|-----------------|
| COMPANY | | | |
| NAME 1. | | ADDRESS | |
| POLICY NO. | | EFFECTIVE DATE | EXPIRATION DATE |
| NAME 2. | | ADDRESS | |
| POLICY NO. | | EFFECTIVE DATE | EXPIRATION DATE |

| | | | |
|---|-----------------|-----------------------------|--------------------|
| COVERAGE | | | |
| STRUCTURE/VEHICLE | | CONTENTS, PERSONAL PROPERTY | |
| BUSINESS INTERRUPTION, LOSS EARNINGS, LIVING EXPENSES | | | |
| 1. <input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL | NAME OF INSURED | | ADDRESS OF INSURED |
| 2. <input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL | NAME OF INSURED | | ADDRESS OF INSURED |
| PREVIOUS INSURANCE CARRIER NAME | | ADDRESS | PHONE NO. |
| \$ _____ STRUCTURE/VEHICLE \$ _____ CONTENTS \$ _____ OTHER ? _____ | | | |
| PREVIOUS LOSSES, CANCELLATIONS | | | |

| | | |
|------------------------|--|-----------|
| INSURANCE AGENT | | |
| NAME 1. | | ADDRESS |
| NAME 2. | | ADDRESS |
| | | PHONE NO. |

| | | |
|---|--|-----------|
| ADJUSTER/INVESTIGATOR | | |
| NAME OF COMPANY ADJUSTER/INVESTIGATOR 1. | | ADDRESS |
| NAME OF COMPANY ADJUSTER/INVESTIGATOR 2. | | ADDRESS |
| NAME OF PUBLIC ADJUSTER | | ADDRESS |
| | | PHONE NO. |

| | | |
|------------------------|--|-------------------------------------|
| TOTAL PAID LOSS | | |
| STRUCTURE 1. \$ | | CONTENTS/PERSONAL PROPERTY 1. \$ |
| STRUCTURE 2. \$ | | OTHER (Explain) 1. \$ |
| | | OTHER (Explain) 2. \$ |

| |
|----------------|
| REMARKS |
| |
| |
| |
| |
| |
| |
| |

Figure 2-2.11(a) Insurance information field notes (Form 906-10).

2-2.11 Insurance Information Field Notes (Form 906-10). The form shown in Figure 2-2.11(a) is used for recording information on the insurance company, coverage, agent, adjuster, and loss paid. The form is divided into six sections. The agency conducting the investigation and the file number should be recorded in the upper right corner.

The first section is for identifying the insurance company or companies involved with the fire loss. In addition to the identification of the company, the policy number, effective date, and expiration date should be recorded. As shown in Figure 2-2.11(b), the owner of this property was insured with State Casualty, with policy effective dates from December 1, 1990 to December 1, 1993.

| COMPANY | | | |
|---------------------------------------|--|-----------------------------------|--|
| NAME 1. <i>State Casualty</i> | ADDRESS <i>6278 Ford Rd., Utica</i> | PHONE NO. <i>732-1179</i> | |
| POLICY NO. <i>C 351-47-6284912</i> | EFFECTIVE DATE <i>12-1-90</i> | EXPIRATION DATE <i>12-1-93</i> | |
| NAME 2. | ADDRESS | PHONE NO. | |
| POLICY NO. | EFFECTIVE DATE | EXPIRATION DATE | |

Figure 2-2.11(b) Example of the company section of an insurance information form.

The second section of the form is for recording data on the amount of coverage, the insured person, and any previous insurance history he or she might have. In the example shown in Figure 2-2.11(c), John Ayres has \$40,000 in coverage on his dwelling and \$20,000 in coverage on the contents. There was no previous insurance carrier and no loss experience.

| COVERAGE | | | |
|---|--|--|--|
| STRUCTURE/VEHICLE <i>40,000</i> | CONTENTS, PERSONAL PROPERTY <i>20,000</i> | BUSINESS INTERRUPTION, LOSS EARNINGS, LIVING EXPENSES <i>None</i> | |
| 1. <input type="checkbox"/> NEW <input checked="" type="checkbox"/> RENEWAL | NAME OF INSURED <i>John Ayres</i> | ADDRESS OF INSURED <i>6478 Smithton Dr.</i> | |
| 2. <input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL | NAME OF INSURED | ADDRESS OF INSURED | |
| PREVIOUS INSURANCE CARRIER NAME <i>N/A</i> | ADDRESS | PHONE NO. | |
| \$ _____ STRUCTURE/VEHICLE \$ _____ CONTENTS \$ _____ OTHER ? _____ | | | |
| PREVIOUS LOSSES, CANCELLATIONS <i>N/A</i> | | | |

Figure 2-2.11(c) Example of the coverage section of an insurance information form.

The next section is used to identify the insurance agent(s) and where they can be contacted. [See Figure 2-2.11(d).]

| INSURANCE AGENT | | |
|-----------------------------------|------------------------------------|------------------------------|
| NAME 1. <i>Colin Kingsbury</i> | ADDRESS <i>21936 Lennan Dr.</i> | PHONE NO. <i>731-8462</i> |
| NAME 2. | ADDRESS | PHONE NO. |

Figure 2-2.11(d) Example of the insurance agent section of an insurance information form.

The fourth section is used to identify the person(s) responsible for adjusting the loss or investigating the loss for the insurance company. In the example shown in Figure 2-2.11(e), the adjuster is Bernice Kress of Michigan Claims. There was no public adjuster assigned.

| ADJUSTER/INVESTIGATOR | | |
|--|--------------------------------|------------------------------|
| NAME OF COMPANY ADJUSTER/INVESTIGATOR 1. <i>Bernice Kress</i> | ADDRESS <i>Mich. Claims</i> | PHONE NO. <i>629-8413</i> |
| NAME OF COMPANY ADJUSTER/INVESTIGATOR 2. | ADDRESS | PHONE NO. |
| NAME OF PUBLIC ADJUSTER <i>None</i> | ADDRESS | PHONE NO. |

Figure 2-2.11(e) Example of the adjuster/investigator section of an insurance information form.

The total paid loss section is used to record the actual insurance company settlement. In addition to the loss to the structure and contents, payments for business interruption, additional living expense, or other payments can be recorded. In the example shown in Figure 2-2.11(f), \$23,900 was paid for damage to the structure and \$18,000 for damage to the contents.

| TOTAL PAID LOSS | | |
|----------------------------------|---|--------------------------|
| STRUCTURE 1. \$ <i>23,900</i> | CONTENTS/PERSONAL PROPERTY 1. \$ <i>18,000</i> | OTHER (Explain) 1. \$ |
| STRUCTURE 2. \$ | CONTENTS/PERSONAL PROPERTY 2. \$ | OTHER (Explain) 2. \$ |

Figure 2-2.11(f) Example of the total paid loss section of an insurance information form.

The last section is a remarks section. If there is information from the adjuster or insurance agent that is pertinent to the investigation, it should be listed in this section. If the investigator sees anything suspicious in the insurance arrangement or the way the loss is handled, this can be noted also. [See Figure 2-2.11(g).]

| REMARKS |
|--|
| <i>Nothing suspicious to adjuster or agent. Loss paid 6/15/93.</i> |
| |
| |
| |
| |
| |

Figure 2-2.11(g) Example of the remarks section of an insurance information form.

RECORDS/DOCUMENTS **FIELD NOTES 906-11**

AGENCY

FILE NUMBER

Use this form as a checklist to indicate which records have been considered in the investigation. The Remarks sections should be used to note availability, contacts, and so forth.

INCIDENT RELATED

| | | |
|--------------------------|--------------|---------|
| FIRE DEPT. NAME | INCIDENT NO. | REMARKS |
| POLICE DEPT. NAME | FILE NO. | REMARKS |
| INSURANCE CO. NAME | CASE NO. | REMARKS |
| GAS CO. NAME | REMARKS | |
| ELECTRIC CO. NAME | REMARKS | |
| MEDIA COVERAGE | REMARKS | |
| MEDIA COVERAGE | REMARKS | |
| MEDIA COVERAGE | REMARKS | |
| OTHER — INCIDENT RELATED | REMARKS | |
| OTHER — INCIDENT RELATED | REMARKS | |

PROPERTY RECORDS

| | |
|----------------------|---------|
| MORTGAGE HOLDER | REMARKS |
| LIEN HOLDER | REMARKS |
| TAX RECORDS | REMARKS |
| CONTRACTS/LEASES | REMARKS |
| TITLES/REGISTRATIONS | REMARKS |
| ZONING/CODES | REMARKS |
| DEEDS | REMARKS |
| OTHER | REMARKS |
| OTHER | REMARKS |

BUSINESS/PERSONAL

| | |
|---------------------------|---------|
| ACCOUNTING | REMARKS |
| INVENTORY | REMARKS |
| BANKS/CREDIT UNIONS, ETC. | REMARKS |
| BUSINESS AND PERSONAL TAX | REMARKS |
| CRIMINAL HISTORY | REMARKS |
| CIVIL LITIGATIONS | REMARKS |

Figure 2-2.12(a) Records/documents field notes (Form 906-11).

2-2.12 Records/Documents Field Notes (Form 906-11). The final form is used to track other records and documents that were reviewed or identified as available during the investigation. [See Figure 2-2.12(a).] This form is divided into three sections. For each type of record, a remarks section is available to comment on the records, note availability, or identify contacts.

The first section deals with incident-related records. All people or companies involved with the incident can be identified. In the example shown in Figure 2-2.12(b), the Clio Fire Department was there, and their report is attached to the entire package. The Vienna Police Department was present at the scene, and their report is attached. The insurance company is listed, which also coincides with Form 906-10, and the example shows their case number and that their records are available, if needed. The gas and electric company is Consumers. No media coverage or other people or companies were involved.

| INCIDENT RELATED | | |
|---|------------------------------------|--|
| FIRE DEPT. NAME <i>Clio</i> | INCIDENT NO. <i>206</i> | REMARKS <i>Attached</i> |
| POLICE DEPT. NAME <i>Vienna</i> | FILE NO. <i>629-93</i> | REMARKS <i>Attached</i> |
| INSURANCE CO. NAME <i>State Casualty</i> | CASE NO. <i>276-93</i> | REMARKS <i>Available if needed.</i> |
| GAS CO. NAME <i>Consumers</i> | REMARKS <i>No contact made.</i> | |
| ELECTRIC CO. NAME <i>Consumers</i> | REMARKS <i>No contact made.</i> | |
| MEDIA COVERAGE | REMARKS | |
| MEDIA COVERAGE | REMARKS | |
| MEDIA COVERAGE | REMARKS | |
| OTHER — INCIDENT RELATED | REMARKS | |
| OTHER — INCIDENT RELATED | REMARKS | |

Figure 2-2.12(b) Example of the incident related section of a records/documents form.

The second section of the form is for comments on records relating to the property. These comments could be applied whether the property is a structure, vehicle, or other property.

For example, an automobile could have a lien against it, or it could be leased and would have registration documents.

In the example shown in Figure 2-2.12(c), the mortgage holder and the tax records were checked and the payments were found to be current.

| PROPERTY RECORDS | |
|--------------------------------------|---------------------------|
| MORTGAGE HOLDER <i>State Bank</i> | REMARKS <i>Current</i> |
| LIEN HOLDER <i>N/A</i> | REMARKS |
| TAX RECORDS <i>Clio City Hall</i> | REMARKS <i>Current</i> |
| CONTRACTS/LEASES | REMARKS |
| TITLES/REGISTRATIONS | REMARKS |
| ZONING/CODES | REMARKS |
| DEEDS | REMARKS |
| OTHER | REMARKS |
| OTHER | REMARKS |

Figure 2-2.12(c) Example of the property records section of a records/documents form.

The final section of the form is for business and personal records. If the fire is suspicious or incendiary, the investigator might want to review personal or business records for any evidence of illegal activity. As these records are reviewed, comments can be made on the appropriate lines. [See Figure 2-2.12(d).]

| BUSINESS/PERSONAL | |
|---------------------------|---------|
| ACCOUNTING | REMARKS |
| INVENTORY | REMARKS |
| BANKS/CREDIT UNIONS, ETC. | REMARKS |
| BUSINESS AND PERSONAL TAX | REMARKS |
| CRIMINAL HISTORY | REMARKS |
| CIVIL LITIGATIONS | REMARKS |

Figure 2-2.12(d) Example of the business/personal section of a records/documents form.