A   39045   CA   03   16	YYYY  2012	
B Location★ Check this box to Indicate that the address for this incident is provided on the Wildland Fire Census Tract 0043 -02		
X Street address Intersection In front of Rear of Adjacent to  Directions  800   S Prefix LOI ATMACH APT./Suite/Room City	DI   CA   95242   -	
C Incident Type *	E1 Date & Times Midnight is 0000 E2 Shift & Alarms	
321   EMS call, excluding vehicle	Check boxes if Month Day Year Hr Min Sec Local Option	
D Aid Given or Received*	Date. Alarm ALARM always required  Alarm Alarm Alarm Alarm Alarm District  Date. Alarm Alarm District  Date. Alarm Alarm Alarm District  Alarm District  Alarm District	
1 Mutual aid received 2 Automatic aid recv. 3 Mutual aid given 4 Automatic aid given 5 Other aid given N None  Their FDID Their State  Their FDID Their State  Their FDID Their State	ARRIVAL required, unless canceled or did not arrive  X Arrival * 03 16 2012 16:17:56  CONTROLLED Optional, Except for wildland fires  Controlled  LAST UNIT CLEARED, required except for wildland fires  Last Unit  Cleared 03 16 2012 16:32:55  E3  Special Studies  Local Option  Special Study ID# Special Study Value	
F Actions Taken *	G1 Resources * G2 Estimated Dollar Losses & Values	
Additional Action Taken (2)  Additional Action Taken (3)	Check this box and skip this section if an Apparatus or Personnel form is used.  Apparatus Personnel  Suppression Contents \$ , 000 , 000    EMS 0001 0003    Other Personnel Contents C	
Completed Modules  Fire-2  Deaths Inju  Fire Structure-3  Civil Fire Cas4  Fire Serv. Cas5  XEMS-6  HazMat-7  Wildland Fire-8  XApparatus-9  Personnel-10  Arson-11  H1 * Casualties  Civilian  Fire  Service  Civilian  Lipute for Confined  Detector  Required for Confined  Detector alerted occ  U Unknown	None    Note   N	
J Property Use* Structures	341 Clinic, clinic type infirmary 539 Household goods, sales, repairs 342 Doctor/dentist office 579 Motor vehicle/boat sales/repair	
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 X Care facility for the aged 331 Hospital Outside 124 Playground or park 655 Crops or orchard	361 Prison or jail, not juvenile 571 Gas or service station 419 1-or 2-family dwelling 599 Business office 429 Multi-family dwelling 615 Electric generating plant 439 Rooming/boarding house 629 Laboratory/science lab 449 Commercial hotel or motel 700 Manufacturing plant 459 Residential, board and care 819 Livestock/poultry storage(barn) 464 Dormitory/barracks 882 Non-residential parking garage 519 Food and beverage sales 891 Warehouse 936 Vacant lot 981 Construction site 938 Graded/care for plot of land 984 Industrial plant yard	
669 Forest (timberland)	946 Lake, river, stream  951 Railroad right of way  Lookup and enter a Property Use code only if you have NOT checked a Property Use box:	
807 Outdoor storage area 919 Dump or sanitary landfill 931 Open land or field	960 Other street 961 Highway/divided highway 962 Residential street/driveway Property Use 311  24-hour care Nursing homes, NFIRS-1 Revision 03/11/99	

K1 Person/Entity Local Option	Involved  Business name (if applicable)  Area Code  Phone Number
incident location. Then skip the three duplicate address lines.  Pos	MI Last Name  Suffix  Prefix Street or Highway  t Office Box  Apt./Suite/Room City  ate Zip Code  red? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary
Then check t	con involved? this box and skip this section.  Business name (if Applicable)  Area Code Phone Number
Check this box if same address as incident location. Then skip the three duplicate address lines.	,Ms., Mrs. First Name  MI Last Name  Suffix  Der Prefix Street or Highway  Street Type Suffix  Apt./Suite/Room City  ate Zip Code
a 24-hour care Nu EMS call, excluding 16:17:56 arrived of The following acti	6:13:22 dispatched To 800 S HAM LN /43A/LODI, CA 95242. The location is arsing homes, 4 or more persons. The incident was determined to be a(n) ag vehicle accident with injury.  on scene.  ons were performed on scene:  column 1:10:10:10:10:10:10:10:10:10:10:10:10:10
Units responding w Unit 2051 responde	vere:
16:32:55 all unit	s back in service.
For EMS calls, pat	tient information is included in the EMS section of this report.
L Authorization  139889  Officer in charge I	Alvarez, Paul A. FE 2051 03 16 2012  Signature Position or rank Assignment Month Day Year
Check Box if X 139889 same Member making reporting charge.	Alvarez, Paul A. FE 2051 03 16 2012  Position or rank Assignment Month Day Year