

A FDID 05180 * State CT * Incident Date 01/29/2016 * Station 5 Incident Number 16-0001041 * Exposure 000 * Delete 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. Census Tract 0212 - 00

Street address 35 Sixth ST Intersection In front of Rear of Adjacent to Directions

Number/Milepost Prefix Street or Highway Street Type Suffix

STAMFORD CT 06905 -

Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type * 321 EMS call, excluding vehicle

Incident Type

D Aid Given or Received*

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 Incident Number

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm ALARM always required

Date. Alarm * 01 29 2016 13:47:58

ARRIVAL required, unless canceled or did not arrive

Arrival * 01 29 2016 13:57:00

CONTROLLED Optional, Except for wildland fires

Controlled 01 29 2016 14:23:42

LAST UNIT CLEARED, required except for wildland fires

Last Unit Cleared 01 29 2016 14:23:42

E2 Shift & Alarms Local Option

4 01 05

Shift or Alarms District Platoon

E3 Special Studies Local Option

Special Study ID# Special Study Value

F Actions Taken *

311 Assist Medic Unit

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 0001 0004

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. None

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 HazMat actions
2 Propane gas: <21 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 > 55gal.. Please complete the HazMat form

I Mixed Use Property

NN Not Mixed
10 Assembly use
20 Education use
33 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

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:

Property Use 599

Business office

05180
FDID *

CT
State *

MM DD YYYY
1 29 2016
Incident Date *

5
Station

16-0001041
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

Assisted with medic 3 in packaging patient and Engine 5 crew drove ambulance to hospital as well.

A FDID 05180 * State CT * Incident Date 02/08/2016 * Station 5 Incident Number 16-0001430 * Exposure 000 * Delete 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. Census Tract 0212 - 00

Street address 35 Sixth ST
 Number/Milepost Prefix Street or Highway Street Type Suffix

Intersection In front of Rear of Adjacent to Directions

STAMFORD CT 06905 -
 Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type * 321 EMS call, excluding vehicle
 Incident Type

D Aid Given or Received*

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 Incident Number

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date. ALARM always required

Month Day Year Hr Min Sec
02 08 2016 15:03:50

Alarm * Arrival * 02 08 2016 15:10:10
 ARRIVAL required, unless canceled or did not arrive

Controlled 02 08 2016 15:21:19
 CONTROLLED Optional, Except for wildland fires

Last Unit Cleared 02 08 2016 15:21:19
 LAST UNIT CLEARED, required except for wildland fires

E2 Shift & Alarms Local Option

1 05
 Shift or Alarms District Platoon

E3 Special Studies Local Option

Special Study ID# Special Study Value

F Actions Taken *

32 Provide basic life
 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 0001 0004
 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. None

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 HazMat actions
 2 Propane gas: <21 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 > 55gal., Please complete the HazMat form

I Mixed Use Property

NN Not Mixed
 10 Assembly use
 20 Education use
 30 Medical use
 40 Residential use
 50 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

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

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

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

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

981 Construction site
 984 Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:
 Property Use 599
Business office

NFIRS-1 Revision 03/11/99

05180
FDID *

CT
State *

MM DD YYYY
2 8 2016
Incident Date *

5
Station

16-0001430
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

E5 responded to the above location for a report of 17-year-old, Female, Conscious, Breathing. Problem Description: PATIENT PASSED OUT. E5 arrived on scene and found a conscious and alert female sitting upright on the floor at the facility front desk being tended to by facility staff. E5 began a PT history/assessment/interventions. M3 arrived on scene and assumed medical control. E5 crew assisted M3 with Pt packaging to a stretcher and movement to the ambulance for transport to the Er. No further actions taken and E5 returned to service. See EMS NFIRS report for further information.
02/08/2016 16:13:52 rkerwin

A FDID * 05180 State * CT Incident Date * 02 15 2017 Station 5 Incident Number * 17-0001219 Exposure * 000 Delete 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. Census Tract 0216 - 00

Street address 35 Sixth ST Intersection Number/Milepost Prefix Street or Highway Street Type Suffix

In front of Rear of Adjacent to Directions STAMFORD CT 06905 Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type * 321 EMS call, excluding vehicle

Incident Type

D Aid Given or Received*

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 Incident Number

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date. ALARM always required

Alarm * 02 15 2017 10:43:38 Month Day Year Hr Min Sec

Arrival * 02 15 2017 10:47:02 ARRIVAL required, unless canceled or did not arrive

Controlled 02 15 2017 11:08:40 CONTROLLED Optional, Except for wildland fires

Cleared 02 15 2017 11:08:40 LAST UNIT CLEARED, required except for wildland fires

E2 Shift & Alarms Local Option

3 05 Shift or Alarms District

E3 Special Studies Local Option

ANONE Special Study ID# Special Study Value

F Actions Taken *

311 Assist Medic Unit 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 0001

EMS 0004

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. None

Property \$ 000, 000, 000

Contents \$ 000, 000, 000

PRE-INCIDENT VALUE: Optional

Property \$ 000, 000, 000

Contents \$ 000, 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 0 0

Civilian 0 0

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 HazMat actions
2 Propane gas: <11 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 > 55gal. Please complete the HazMat form

I Mixed Use Property

NN Not Mixed

10 Assembly use
20 Education use
33 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

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

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

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

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

981 Construction site
984 Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:
Property Use 599
Business office

05180
FDID *

CT
State *

MM DD YYYY
2 15 2017
Incident Date *

5
Station

17-0001219
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

Responded to a reported 27 year old female having a seizure. The patient was found with a clinician lying on an examination bed. The patient was conscious and alert. The patient's vitals were assessed. Medic 5 arrived on scene and assumed patient care. The patients father also arrived on scene to assist. For further see EMS narrative.

A FDID * 05180 State * CT MM 05 DD 24 YYYY 2017 Station 5 Incident Number * 17-0003832 Exposure * 000 Delete 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. Census Tract 0216 - 00

Street address 35 Sixth ST Intersection Number/Milepost Prefix Street or Highway Street Type Suffix

In front of Rear of Adjacent to Directions STAMFORD CT 06905 Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type * 321 EMS call, excluding vehicle Incident Type

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date. ALARM always required

Alarm * 05 24 2017 11:31:09 Month Day Year Hr Min Sec

ARRIVAL required, unless canceled or did not arrive

Arrival * 05 24 2017 11:34:43

CONTROLLED Optional, Except for wildland fires

Controlled 05 24 2017 11:45:50

LAST UNIT CLEARED, required except for wildland fires

Last Unit Cleared 05 24 2017 11:45:50

E2 Shift & Alarms Local Option 1 05 Shift or Alarms District Platoon

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

D Aid Given or Received*

1 Mutual aid received Their FDID Their State

2 Automatic aid recv.

3 Mutual aid given

4 Automatic aid given

5 Other aid given

N None Their Incident Number

F Actions Taken *

86 Investigate Primary Action Taken (1)

31 Provide first aid & 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

EMS 0001

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. None

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 HazMat actions

2 Propane gas: <21 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 > 55gal., please complete the HazMat form

I Mixed Use Property

NN Not Mixed

10 Assembly use

20 Education use

33 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

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/boarder house

449 Commercial hotel or motel

459 Residential, board and care

464 Dormitory/barracks

519 Food and beverage sales

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

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

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

981 Construction site

984 Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box.

Property Use 599

Business office

NFIRS-1 Revision 03/11/99

05180
FDID *

CT
State *

MM DD YYYY
5 24 2017
Incident Date *

5
Station

17-0003832
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

05/24/2017 22:58:56 jdombrowski

R1, M% responded to a 29 year old female who passed out. Upon arrival, R1 crew was directed to the patient laying in the exam room. Patient was complaining of being cold and light headed. We began an initial assessment and took vitals, BP was 116/76 pulse was 42. M5 arrived on scene an took over patient care. No further FD action required. For additional patient information refer to the medic's report.

A FDID * 05180 State * CT Incident Date * MM 12 DD 11 YYYY 2017 Station 5 Incident Number * 17-0009881 Exposure * 000 Delete 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. Census Tract 0216 - 00

Street address 35 Sixth ST Intersection Number/Milepost Prefix Street or Highway Street Type Suffix

In front of Rear of Adjacent to Directions STAMFORD CT 06905 Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type * 321 EMS call, excluding vehicle Incident Type

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date. ALARM always required

Alarm * 12 11 2017 14:15:32 Month Day Year Hr Min Sec

ARRIVAL required, unless canceled or did not arrive

Arrival * 12 11 2017 14:19:14

CONTROLLED Optional, Except for wildland fires

Controlled 12 11 2017 15:33:06

LAST UNIT CLEARED, required except for wildland fires

Last Unit Cleared 12 11 2017 15:33:06

E2 Shift & Alarms Local Option 2 05

Shift or Alarms District Platoon

D Aid Given or Received*

1 Mutual aid received Their FDID Their State

2 Automatic aid recv.

3 Mutual aid given

4 Automatic aid given

5 Other aid given

N None Their Incident Number

E3 Special Studies Local Option ANONE

Special Study ID# Special Study Value

F Actions Taken *

311 Assist Medic Unit 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

EMS 0001

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. None

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 HazMat actions

2 Propane gas: <21 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 > 55gal.. Please complete the HazMat form

I 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

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

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

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

981 Construction site

984 Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:

Property Use 599

Business office

NFIRS-1 Revision 03/11/99

05180
FDID *

CT
State *

MM DD YYYY
12 11 2017
Incident Date *

5
Station

17-0009881
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

12/11/2017 15:56:30 dmitchell

R1 and Medic 5 responded to 35 Sixty Street for a 21 y/o female that was unconscious. Crew found woman sitting in examination room being tended to by physician and nurse. Patient was lethargic and postictal. Oxygen therapy was started. Patient had another seizure while waiting for medics. Upon arrival Medics assumed care and transported to hospital

A FDID **05180** * State **CT** Incident Date **03 18 2018** * Station **5** Incident Number **18-0002824** * Exposure **000** * Delete 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. Census Tract **0216** - **00**

Street address **35** **Sixth** **ST** Intersection Number/Milepost Prefix Street or Highway Street Type Suffix

In front of Rear of Adjacent to Directions **STAMFORD** **CT** **06905** Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type * **321** **EMS call, excluding vehicle**

Incident Type

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date. ALARM always required

Alarm * **03 18 2018 12:30:41** Month Day Year Hr Min Sec

ARRIVAL required, unless canceled or did not arrive

Arrival * **03 18 2018 12:34:29**

CONTROLLED Optional, Except for wildland fires

Controlled **03 18 2018 12:40:30**

LAST UNIT CLEARED, required except for wildland fires

Last Unit Cleared **03 18 2018 12:40:30**

E2 Shift & Alarms Local Option

3 **WOO** Shift or Alarms District

Platoon

D Aid Given or Received*

1 Mutual aid received Their FDID Their State

2 Automatic aid recv.

3 Mutual aid given

4 Automatic aid given

5 Other aid given Their Incident Number

N None

E3 Special Studies Local Option

ANONE Special Study ID# Special Study Value

F Actions Taken *

311 **Assist Medic Unit** 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**

EMS **0001**

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. None

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

Unknown

H3 Hazardous Materials Release

N None

1 Natural Gas: slow leak, no evacuation or HazMat actions

2 Propane gas: <21 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 > 55gal.. Please complete the HazMat form

I Mixed Use Property

NN Not Mixed

10 Assembly use

20 Education use

33 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

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:

Property Use **341**

Clinic, clinic-type

NFIRS-1 Revision 03/11/99

Narrative:

03/18/2018 20:34:44 mmccullagh

Responded to a reported male unconscious next to the incident address. Rescue 1 arrived on scene and found Stamford PD questioning the patient. Medic 1 arrived on scene and assumed patient care. Stamford Fire personnel assisted Medic 1 walk the patient to the ambulance. Stamford Fire personnel had minimal patient contact.

A FDID * 05180 State * CT Incident Date * 11 01 2018 Station 9 Incident Number * 18-0009780 Exposure * 000 Delete 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. Census Tract 0216 - 00

Street address 35 Sixth ST Intersection Number/Milepost Prefix Street or Highway Street Type Suffix

In front of Rear of Adjacent to Directions STAMFORD CT 06905 Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type * 321 EMS call, excluding vehicle Incident Type

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date. ALARM always required

Alarm * 11 01 2018 15:07:54 Month Day Year Hr Min Sec

ARRIVAL required, unless canceled or did not arrive

Arrival * 11 01 2018 15:11:11

CONTROLLED Optional, Except for wildland fires

Controlled 11 01 2018 15:20:30

LAST UNIT CLEARED, required except for wildland fires

Last Unit 11 01 2018 15:20:30 Cleared

E2 Shift & Alarms Local Option

3 WOO Shift or Alarms District Platoon

D Aid Given or Received*

1 Mutual aid received Their FDID Their State

2 Automatic aid recv.

3 Mutual aid given

4 Automatic aid given

5 Other aid given Their Incident Number

N None

E3 Special Studies Local Option

ANONE Special Study ID# Special Study Value

F Actions Taken *

32 Provide basic life 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 0001 0004

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. None

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 <input type="checkbox"/>	<input type="checkbox"/>
Civilian <input type="checkbox"/>	<input type="checkbox"/>

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 HazMat actions

2 Propane gas: <21 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 > 55gal.. Please complete the HazMat form

I Mixed Use Property

NN Not Mixed

10 Assembly use

20 Education use

33 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

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

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

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

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

981 Construction site

984 Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:

Property Use 340

Clinics, doctors offices,

NFIRS-1 Revision 03/11/99

Narrative:

11/01/2018 16:05:07 sklee

E9 and M5 responded to 35 Sixth Street for a report of "32 Y/O FEMALE SEIZING". E9 arrived on scene and found the patient under a doctors care. She was conscious and alert. E9 members got a history of what happened and stood by since the patient and doctor did not want FD assistance until M5 arrived and cleared E9. No further SFD action was taken and E9 cleared the scene and returned to service.

A FDID 05180 State CT Incident Date 02/06/2019 Station 5 Incident Number 19-0001119 Exposure 000 Delete 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. Census Tract 0216 - 00

Street address 35 Sixth ST
 Number/Milepost Prefix Street or Highway Street Type Suffix

Intersection
 In front of
 Rear of
 Adjacent to
 Directions

STAMFORD CT 06905
 Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type *
321 EMS call, excluding vehicle
 Incident Type

D Aid Given or Received*

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 Incident Number

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date. ALARM always required

Alarm * 02 06 2019 09:07:23
 ARRIVAL required, unless canceled or did not arrive

Arrival * 02 06 2019 09:11:14
 CONTROLLED Optional, Except for wildland fires

Controlled 02 06 2019 09:13:40
 LAST UNIT CLEARED, required except for wildland fires

Last Unit Cleared 02 06 2019 09:13:40

E2 Shift & Alarms Local Option

4 WOO
 Shift or Alarms District Platoon

E3 Special Studies Local Option

ANONE
 Special Study ID# Special Study Value

F Actions Taken *

312 EMS - FD Response /
 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 0001 0004

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. None

Property \$ 000, 000, 000
 Contents \$ 000, 000, 000

PRE-INCIDENT VALUE: Optional

Property \$ 000, 000, 000
 Contents \$ 000, 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 HazMat actions
 2 Propane gas: <11 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 > 55gal.. Please complete the HazMat form

I Mixed Use Property

NN Not Mixed
 10 Assembly use
 20 Education use
 33 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

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

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

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

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

981 Construction site
 984 Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:
 Property Use 340
Clinics, doctors offices,
 NFIRS-1 Revision 03/11/99

05180
FDIR *

CT
State *

MM DD YYYY
2 6 2019
Incident Date *

5
Station

19-0001119
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

Sems medic 3 cancelled Engine 5's response prior to engine 5 making any patient contact.

A FDID 05180 * State CT * Incident Date 04 08 2019 Station 5 Incident Number 19-0002952 * Exposure 000 * Delete 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. Census Tract 0216 - 00

Street address 35 Sixth ST
 Number/Milepost Prefix Street or Highway Street Type Suffix

Intersection In front of Rear of Adjacent to Directions

STAMFORD CT 06905 -
 Apt./Suite/Room City State Zip Code

Cross street or directions, as applicable

C Incident Type *
321 EMS call, excluding vehicle
 Incident Type

D Aid Given or Received*

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 Incident Number

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date. ALARM always required

Alarm * 04 08 2019 15:01:04
 ARRIVAL required, unless canceled or did not arrive

Arrival * 04 08 2019 15:03:53
 CONTROLLED Optional, Except for wildland fires

Controlled 04 08 2019 15:10:18
 LAST UNIT CLEARED, required except for wildland fires

Last Unit Cleared 04 08 2019 15:10:18

E2 Shift & Alarms Local Option

1 WOO
 Shift or Alarms District Platoon

E3 Special Studies Local Option

ANONE
 Special Study ID# Special Study Value

F Actions Taken *

32 Provide basic life
 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
 EMS 0001
 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. None

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 HazMat actions
 2 Propane gas: <21 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 > 55gal., Please complete the HazMat form

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NN Not Mixed
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J Property Use* Structures

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 331 Hospital

341 Clinic, clinic type infirmary
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 449 Commercial hotel or motel
 459 Residential, board and care
 464 Dormitory/barracks
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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

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

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

981 Construction site
 984 Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:
 Property Use 965
Vehicle parking area

05180
FDID *

CT
State *

MM DD YYYY
4 8 2019
Incident Date *

5
Station

19-0002952
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

04/08/2019 18:38:01 dlowndes

Engine 5 [E5] and Medic 3 [M3] were dispatched on map grid 66C to 35 Sixth Street in the parking lot for female patient that has passed out. E5 arrived on scene and found a female patient supine on the ground in care of medical staff, C/A. They report that the patient did not fall and was eased to the ground and was unconscious for approximately 10 seconds. E5 crew began to assess the patient as M3 arrived on scene and took over patient care. E5 crew assisted with packaging the patient on the stretcher. No further actions were required, E5 returned to service.