

Instructions For Preparing New Mexico Incident Report (Form SFM-FR-88-2)

This report was developed for use by local fire departments to obtain information that is required on the State Fire Marshal's Monthly Fire Report (SFM-FR-2002). The State Fire Marshal's Office participates in the National Incident Fire Reporting System and uses the information compiled from these reports. If your department is using a different incident report, confirm the summary information prior to filing of the monthly report with the State Fire Marshal's Office. It is not necessary to send the incident report (SFM-FR-88-2) to the State Fire Marshal's Office.

Please enter your department name, code number and whether rural or municipal in the space provided. Your code number can be obtained from the State Fire Marshal's Office.

Complete the information requested in the blanks provided as completely as possible. If necessary use additional pages. Use military time.

Please use numerals rather than spelling out. (Ex. Use "0", do not use "none" or "zero".)

A. **TYPE OF RUN:** In this section, please indicate type of run. Note: Item 04, *Automobile* – this item should include all vehicles. (pick-up, semi, tractor, car, etc.) Item 07, *other* – will require an explanation on the "describe" line. Item 12, *Assist Public* – will include getting a cat out of a tree, putting up banners for a function, etc., also to be explained on the "describe" line. Item 13, *Hazardous Material* - advise if government or commercially owned material is involved and include type of material involved.

B. **SOURCE OF IGNITION:** This should list the source of ignition, not all items that were damaged. Item 27, *Fireplace* – this should also include chimney. Item 29, *Stove Top* – this will address a cooking accident in which material catches on fire due to improper use of the surface heat element.

C. **ARSON / SUSPICIOUS:** In this section, please fill out the item that best explains the occurrence. The Fire Department personnel should make every effort to establish if the fire is of incendiary or suspicious origin. If an investigator, either local or state, is involved, the "*Investigator Requested*" item should be completed.

D. **PROPERTY CLASSIFICATION:** Please check the property classification that best explains the occurrence. Condominium homes will be considered apartments.

E. **TYPES OF CONSTRUCTION:** Please check the type of construction that best explains the occurrence. Item 1, *Fire Resistive* – structural members, including walls, partitions, columns, floors and roofs of non-combustible or limited combustible. (e.g., reinforced concrete). Item 2, *Heavy Timber* – bearing walls and bearing portions of walls are non-combustible and have a minimum fire resistive rating of two hours.

F. **PRIVATE PROTECTION FACILITIES:** With the advent of home sprinkler systems and extensive use of smoke detectors, this section is becoming more important for statistical input.

G. **AREA OF ORIGIN:** Please fill in the area of origin which best explains the occurrence. Item 10, *Attic* – please include basement in this category.

H. **TYPES OF MATERIAL IGNITED:** Please fill in the type of material ignited that best describes the occurrence. Item 02, *Liquid Flammables* – should include gasoline, oil, diesel fuel, kerosene, etc.

I. **EXTENT OF FLAME DAMAGE:** Please fill in the extent of the flame damage that best describes the occurrence.

J. **NUMBER OF INJURIES:** Please fill in total number of injuries to firefighters and civilians.

K. **NUMBER OF DEATHS:** Please fill in total number of deaths resulting from fire. If there are any deaths to report, this form should be accompanied by a FIRE DEATH REPORT FORM, SFM-FD-1.