



NFIRS-1 Basic

A

02101	SD	02	10	2023	STATION 7 (7)	23-02243	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Location Type

Census tract: _____

Street Address
 Intersection
 In Front Of
 Rear Of
 Adjacent To
 Directions
 US National Grid

1414		DEGEEST	DR-Drive	
Number	Prefix	Street or Highway	Street Type	Suffix

	Rapid City	SD	57701
Apt./Suite/Room	City	State	Zip Code

Cross Street: _____

<p>C Incident Type</p> <p>111-Building fire</p>	<p>E1 Dates and Times</p> <p>Alarm 02 10 2023 04:14</p> <p>Arrival 02 10 2023 04:23</p> <p>Controlled 02 10 2023 06:10</p> <p>Last Unit Cleared 02 10 2023 12:10</p>	<p>E2 Shifts and Alarms</p> <p>A 2 Pennington</p> <p>Shift or Alarms District Platoon</p>
<p>D Aid Given Or Received</p> <p> <input type="checkbox"/> 1 Mutual Aid Received <input type="checkbox"/> 2 Auto. Aid Received <input type="checkbox"/> 3 Mutual Aid Given <input type="checkbox"/> 4 Auto. Aid Given <input type="checkbox"/> 5 Other Aid Given <input checked="" type="checkbox"/> None </p> <p> Their FDID: _____ Their State: _____ Their Incident Number: _____ </p>	<p>E3 Special Studies</p> <p>ID# _____ Value _____</p>	

F Actions Taken <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">11-Extinguishment by fire service personnel</div> Primary Action Taken	G1 Resources <input checked="" type="checkbox"/> Apparatus or Personnel Module is used. <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;"></th> <th style="width:20%; text-align: center;">Apparatus</th> <th style="width:20%; text-align: center;">Personnel</th> </tr> </thead> <tbody> <tr> <td>Suppression</td> <td style="border: 1px solid black; text-align: center;">4</td> <td style="border: 1px solid black; text-align: center;">24</td> </tr> <tr> <td>EMS</td> <td style="border: 1px solid black; text-align: center;">2</td> <td style="border: 1px solid black; text-align: center;">6</td> </tr> <tr> <td>Other</td> <td style="border: 1px solid black; text-align: center;">4</td> <td style="border: 1px solid black; text-align: center;">12</td> </tr> </tbody> </table> <input type="checkbox"/> Resource counts include aid received resources.		Apparatus	Personnel	Suppression	4	24	EMS	2	6	Other	4	12	G2 Estimated Dollar Losses and Values Losses: Required for all fires if known. Optional for all non-fires. None Property: \$ <input style="width: 100px;" type="text" value="300,000.00"/> <input type="checkbox"/> Contents: \$ <input style="width: 100px;" type="text" value="200,000.00"/> <input type="checkbox"/> Pre-Incident Values: Optional None Property: \$ <input style="width: 100px;" type="text" value="300,000.00"/> <input type="checkbox"/> Contents: \$ <input style="width: 100px;" type="text" value="200,000.00"/> <input type="checkbox"/>
	Apparatus	Personnel												
Suppression	4	24												
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Other	4	12												

Completed Modules <input type="checkbox"/> 2 - Fire <input type="checkbox"/> 3 - Structure Fire <input type="checkbox"/> 4 - Civilian Fire Cas. <input type="checkbox"/> 5 - Fire Service Cas. <input type="checkbox"/> 6 - EMS <input type="checkbox"/> 7 - HazMat <input type="checkbox"/> 8 - Wildland Fire <input type="checkbox"/> 9 - Apparatus <input type="checkbox"/> 10 - Personnel <input type="checkbox"/> 11 - Arson	H1 Casualties <input type="checkbox"/> None <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;"></th> <th style="width:20%; text-align: center;">Deaths</th> <th style="width:20%; text-align: center;">Injuries</th> </tr> </thead> <tbody> <tr> <td>Fire Service</td> <td style="border: 1px solid black; text-align: center;">0</td> <td style="border: 1px solid black; text-align: center;">2</td> </tr> <tr> <td>Civilian</td> <td style="border: 1px solid black; text-align: center;">1</td> <td style="border: 1px solid black; text-align: center;">3</td> </tr> </tbody> </table> H2 Detector Required for Confined Fires <input type="checkbox"/> 1 - Detector Alerted Occupants <input type="checkbox"/> 2 - Detector Did Not Alert Them <input type="checkbox"/> 3 - Unknown		Deaths	Injuries	Fire Service	0	2	Civilian	1	3	H3 Hazardous Materials Release <input type="checkbox"/> 1 - Natural Gas <input type="checkbox"/> 2 - Propane Gas <input type="checkbox"/> 3 - Gasoline <input type="checkbox"/> 4 - Kerosene <input type="checkbox"/> 5 - Diesel Fuel / Fuel Oil <input type="checkbox"/> 6 - Household Solvents <input type="checkbox"/> 7 - Motor Oil <input type="checkbox"/> 8 - Paint <input type="checkbox"/> 0 - Other <input checked="" type="checkbox"/> None	I Mixed Use Property <input checked="" type="checkbox"/> Not Mixed <input type="checkbox"/> 10 - Assembly Use <input type="checkbox"/> 20 - Education Use <input type="checkbox"/> 33 - Medical Use <input type="checkbox"/> 40 - Residential Use <input type="checkbox"/> 51 - Row Of Stores <input type="checkbox"/> 53 - Enclosed Mall <input type="checkbox"/> 58 - Business and Residential <input type="checkbox"/> 59 - Office Use <input type="checkbox"/> 60 - Industrial Use <input type="checkbox"/> 63 - Military Use <input type="checkbox"/> 65 - Farm Use <input type="checkbox"/> 00 - Other Mixed Use
	Deaths	Injuries										
Fire Service	0	2										
Civilian	1	3										

J Property Use <input type="checkbox"/> None Structures 131 <input type="checkbox"/> Church, Place of Worship 161 <input type="checkbox"/> Restaurant or Cafeteria 162 <input type="checkbox"/> Bar/Tavern or Nightclub 213 <input type="checkbox"/> Elementary School, Kindergarten 215 <input type="checkbox"/> High School, Junior High 241 <input type="checkbox"/> College, Adult Education 311 <input type="checkbox"/> Nursing Home 331 <input type="checkbox"/> Hospital	341 <input type="checkbox"/> Clinic, Clinic-Type Infirmary 342 <input type="checkbox"/> Doctor/Dentist Office 361 <input type="checkbox"/> Prison or Jail, Not Juvenile 419 <input checked="" type="checkbox"/> 1- or 2-Family Dwelling 429 <input type="checkbox"/> MultiFamily Dwelling 439 <input type="checkbox"/> Rooming/Boarding House 449 <input type="checkbox"/> Commerical Hotel or Motel 459 <input type="checkbox"/> Residential, Board and Care 464 <input type="checkbox"/> Dormitory/Barracks 519 <input type="checkbox"/> Food and Beverage Sales	539 <input type="checkbox"/> Household Goods, Sales, Repairs 571 <input type="checkbox"/> Gas or Service Station 579 <input type="checkbox"/> Motor Vehicle/Boat Sales/Repairs 599 <input type="checkbox"/> Business Office 615 <input type="checkbox"/> Electric-Generating Plant 629 <input type="checkbox"/> Laboratory/Science Laboratory 700 <input type="checkbox"/> Manufacturing Plant 819 <input type="checkbox"/> Livestock/Poultry Storage (Barn) 882 <input type="checkbox"/> Non-Residential Parking Garage 891 <input type="checkbox"/> Warehouse
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Outside 124 <input type="checkbox"/> Playground or Park 655 <input type="checkbox"/> Crops or Orchard 669 <input type="checkbox"/> Forest (Timberland) 807 <input type="checkbox"/> Outdoor Storage Area 919 <input type="checkbox"/> Dump or Sanitary Landfill 931 <input type="checkbox"/> Open Land or Field 936 <input type="checkbox"/> Vacant Lot	938 <input type="checkbox"/> Graded/Cared for Plot of Land 946 <input type="checkbox"/> Lake, River, Stream 951 <input type="checkbox"/> Railroad Right-of-Way 960 <input type="checkbox"/> Other Street 961 <input type="checkbox"/> Highway/Divided Highway 962 <input type="checkbox"/> Residential Street/Driveway 981 <input type="checkbox"/> Construction Site 984 <input type="checkbox"/> Industrial Plant Yard	Property Use: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Description Look up and enter a Property Use code and description only if you have NOT checked a Property Use box.
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K2

Owner

Owner and Occupant			6054309072	
Local Option	Person/Entity Type	Business Name (if applicable)	Phone Number	
	Susan		Dotson	
Mr., Ms., Mrs.	First Name	MI	Last Name	Suffix
Number	Prefix	Street or Highway	Street Type	Suffix
Post Office Box	Apt./Suite/Room		City	
State	Zip Code			

L Remarks:

Date: 2-9-2023

Address: 1414 Degeest Dr.

Time: Early morning approximately 0415am

L) BC-1 Tk-1 SQD-1 E-4 E-7 M-7 M-4 dispatched to 1414 Degeest Dr. for a report of an Explosion. M-7 en-route stated smoke showing. On arrival M-7 gave a size up stating, a fully involved residential home partial collapse and exposures noted. M-7 stated they had Pts and requested a second ambulance. BC-1 on arrival confirmed M-7 size up of a fully involved residential home and exposures noted on the Alfa, Bravo, and Delta side of the involved structure.

C) Structure fire / Explosion

H) Structure fire possibly caused by a SUV that drove into a house severing the residential gas meter, which caused a natural gas leak and an explosion. Explosion caused the house to collapse. See RCPD reports for addition information related to vehicle / driver prior to and leading up to this event.

A) Single story wood frame type V residential structure. Fully involved with collapse noted to majority of structure. Only notable remaining standing walls were over garage area on sides Alpha and Bravo. Large body of fire noted throughout footprint of structure. Debris noted on all sides of structure farthest noted was approximately 50-100' away. A venting and free burning residential gas line on the Alpha Delta corner noted. Directly over the free burning gas line was a SUV type vehicle. Rear of vehicle raised off of the ground and resting on the concrete footer of home. Vehicle front end was located in ...

Full primary narrative can be found in NFIRS 1S - Supplemental

M Authorization

				02/10/2023
Officer In Charge ID	Signature	Position or Rank	Assignment	Date
				02/10/2023
Member Making Report ID	Signature	Position or Rank	Assignment	Date

NFIRS-1S Supplemental

A

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Exposures noted on the Alpha Bravo corner to include two pickup trucks. Bravo exposure was a similar type of residual structure. Delta exposure were: one small flatbed trailer, one camper and a similar residual home with fire and smoke noted to garage area camper and small trailer.

Dispatch reported hazards of ammunition and reloading equipment. Multiple small "Pops" heard during the initial fire attack.

R) BC-1 Took command on the Alpha Delta corner. First arriving units assigned to establish a water supply. An operational defensive strategy announced. Tack channel of FG-1 stated. PAR reminder requested every 20 min. Utility ordered to include red cross, MDU, West River electric. Addition units order through the incident as needs identified to include heavy equipment operator, tow trucks, LEO ext. Additional notification made to Fire Prevention and Fire marshal.

Review first arriving unit narratives for initial on scene action. To include 360 size-up, Defensive fire attack tactic, search of both residential exposures, and assessment of SUV and driver.

Division Bravo, Delta, Med group and safety established.

Div-Bravo assigned to LT. Kusser. Units on Div-B included: Tk-6, Haz-6 and E-7. Face to Face with Command and Div-bravo confirmed operation objectives.

Div-Delta assigned to Captain Lange. Units on Div-D included: Tk-1 SQD-1 and E-4. Operation objectives established. Defensive attach, exposure protection and allowing the free-flowing gas to remain Burning reducing the chance of a secondary explosion.

Med Group with M-4. Safety Chief Povandra

MDU arrived and clamped off the gas line stopping the flow of gas at the curb. Allowing crew and equipment access to SUV.

At round this time main body of fire controlled.

T) Operational and crew swap, hot wash.

Injury's reported x 2. Crews transition strategy to evidences protection victim recovery and overhaul. Command Passed to Chief Lipp.

BC Trojanowski