

Introduction to Keying The 2008 NFPA Fire Experience Survey Electronically

You can now fill out a PDF version of the NFPA Fire Experience Survey form electronically. You should only key this form if you received a survey form by mail from the NFPA for this year (*If you have not received a form for this year, please do not key onto this form*).

The form is a PDF version of the form mailed to you, so it would probably be helpful if you have filled it out by hand or had the necessary tabulations along side as you key the form onto the computer. Please note that you will need Adobe Reader Version 6 or higher to submit this form. You can upgrade (free) to the latest version of Adobe Reader from the Adobe website: <http://www.adobe.com/products/acrobat/readstep2.html>

Please ensure that you key your address information, including *the ID number on the left corner of the mailing label* of the survey mailed to you.

When filling out the form, please answer what you can, giving totals where necessary. Even if you had no deaths and only a few minor fires, it is important that you participate in the survey so that a balanced picture of fire losses in the United States can be obtained.

If you have any questions please do not hesitate to call or email: Mike Karter at Tel 800-343-8890, fax 617-984-7478, or email nfesurvey@nfpa.org,

Please try to key onto this form. When you have completed the form, print a copy of the form for your records. Then click the submit button, and follow the on-screen instructions.

You may get a notice 'Sending Data Files by Email', just click the Close button.

Your email application should then open with the email address in the To Field: nfesurvey@nfpa.org.

Click the send button in the upper part of your email display.

**NATIONAL FIRE PROTECTION ASSOCIATION
SURVEY OF FIRE DEPARTMENTS FOR UNITED STATES FIRE EXPERIENCE**

Please key the information from the mailing label of your survey form that was mailed to you below. Make sure you enter the ID number from the upper left corner of your mailing label. If your address is incorrect, please correct it and check the box below.

ID Number: _____

Fire Department Name: _____

Address: _____

City/Town, State, Zip Code: _____

Did you have to correct your address? Yes No

Name of Person Completing Form: _____ **Date:** _____

Title: _____

Non-Emergency Phone Number: (_____) _____ **Fax:** (_____) _____

E-mail Address: _____

Please use enclosed postpaid envelope and return completed survey form to:



NFPA
Fire Analysis and Research Division
1 Batterymarch Park
Quincy, MA 02169-7471

If you fax the form back, please reduce it first to 8½" × 11" size.

FIRE SERVICE PERSONNEL

Number of fire fighters: If actual average strength over the year differed from authorized strength, give the actual figure. Count all fire fighters, regardless of assignment. For volunteers, please report active members (involved in fire fighting) only.

Number of full-time (career) uniform fire fighters: _____

Number of active part-time (call or volunteer) fire fighters: _____

Are the part-time personnel compensated for their time? Yes (1) No (2)

Number of Active Fire Fighters by Age Group: (If data is not available, write NA)

Under 20 _____ , 20–29 _____ , 30–39 _____ , 40–49 _____ , 50–59 _____ ,
60 and Over _____ , Unknown _____

GENERAL INSTRUCTIONS

- To assist fire departments using reporting systems in a state system as part of NFIRS, data classifications are identified for the various questions throughout the form.
- For this study, fire experience for calendar year is requested. Does the data reported on this form cover the time period January 1 to December 31? Yes No

If *No* above, and your department summarizes its data on a fiscal rather than a calendar year basis, report your fire experience for the most recently completed fiscal year and indicate the time period covered:
From _____ to _____ .
- Report fire experience only for areas where you had primary responsibility. Do not include areas where you had mutual aid or assistance responsibilities.
- Please make your answers as legible as possible; data will be keyed for processing directly from this form.
- If the answer to a given question is zero; write 0.
- If you do not keep the records necessary to answer a question, write NA (not available). It is extremely important that answers of NA can be distinguished from zero. For example, if your department had no civilian fire deaths, report 0, do not report NA. No question should be left blank.

PART III: BREAKDOWN OF STRUCTURE FIRES AND OTHER FIRES AND INCIDENTS

Departments using NFIRS 5.0 will find incident type (IT), and the Fixed Property Use (FPU) codes for each category in parentheses. For lines 1 to 13, Section A structure fires include incident type 110-129.

A. FIRES IN STRUCTURES BY FIXED PROPERTY USE (OCCUPANCY) (all in Section A are Incident Type 110-129)	Number of Fires	Number of Civilian Fire Casualties. If none, write 0		Estimated Property Damage from Fire. If no loss, write 0
		Deaths	Injuries	
1. Private Dwellings (1 or 2 family), including mobile homes (FPU 419)				
2. Apartments (3 or more families) (FPU 429)				
3. Hotels and Motels (FPU 449)				
4. All Other Residential (dormitories, boarding houses, tents, etc.) (FPU 400, 439, 459-499)				
5. TOTAL RESIDENTIAL FIRES (Sum of lines 1 through 4)				
6. Public Assembly (church, restaurant, clubs, etc.) (FPU 100-199)				
7. Schools and Colleges (FPU 200-299)				
8. Health Care and Penal Institutions (hospitals, nursing homes, prisons, etc.) (FPU 300-399)				
9. Stores and Offices (FPU 500-599)				
10. Industry, Utility, Defense, Laboratories, Manufacturing (FPU 600-799)				
11. Storage in Structures (barns, vehicle storage garages, general storage, etc.) (FPU 800-899)				
12. Other Structures (outbuildings, bridges, etc.) (FPU 900-999)				
13. TOTALS FOR STRUCTURE FIRES (Sum of lines 5 through 12)				
14a. Fires in Highway Vehicles (autos, trucks, buses, etc.) (IT 131-132, 136-137)				
14b. Fires in Other Vehicles (planes, trains, ships, construction or farm vehicles, etc.) (IT 130, 133-135, 138)				
15. Fires outside of Structures with Value Involved, but Not Vehicles (outside storage, crops, timber, etc.) (IT 140, 141, 161-162, 164, 170-173)				
16. Fires in Brush, Grass, Wildland (excluding crops and timber), with no value involved. (IT 142-143)				
17. Fires in Rubbish, Including Dumpsters (outside of structures), with no value involved. (IT 150-155)				
18. All Other Fires. (IT 100, 160, 163)				
19. TOTALS FOR FIRES (Sum of lines 13 through 18)				
20. Rescue, Emergency Medical Responses (ambulance, EMS, rescue) (IT 300-381)				
21. False Alarm Responses (malicious or unintentional false calls, malfunctions, bomb scares) (IT 700-746)				
22. Mutual Aid Responses Given				
23a. Hazardous Materials Responses (spills, leaks, etc.) (IT 410-431)				
23b. Other Hazardous Responses (arcing wires, bomb removal, power line down, etc.) (IT 440-482, 400)				
24. All Other Responses (smoke scares, lock-outs, animal rescues, etc.) (IT 200-251, 500-699, 800-911)				
25. TOTAL FOR ALL INCIDENTS (Sum of lines 19 through 24)				

Based on what is reported in lines 5 and 13 for number of fires above, please report separately:

Confined fires (e.g., cooking fires confined to cooking vessel, or chimney fire that did not spread beyond chimney, or confined trash fires) (IT 113-118), and Nonconfined fires (IT 110-112, 120-123).

	Number of Confined Fires	Number of Nonconfined Fires
5. Residential Fires (line 5 above)		
13. Structure Fires (line 13 above)		

PART IV: BREAKDOWN OF FALSE ALARM RESPONSES

Please report separately below a further breakdown on false alarm responses reported in item 21 in Part III above. If data for this section is "Not Available", please write NA.

Type of False Alarm	Number of Incidents
1. Malicious, Mischievous False Call (IT 710-715)	
2. System Malfunction (IT 730-739)	
3. Unintentional (tripping on interior device accidentally, etc.) (IT 740-749)	
4. Other False Alarms (bomb scares, etc.) (IT 721, 700)	

PART V: INTENTIONALLY SET FIRES IN STRUCTURES AND VEHICLES

Report in this part fires that were intentionally set for structures and vehicles.

	Number of Fires	Number of Civilian Fire Casualties. If none, write 0		Estimated Property Damage from Fire. If no loss, write 0
		Deaths	Injuries	
1. Structure Fires Intentionally set (IT=110-129, and cause E1=1)				
2. Vehicle Fires Intentionally set (IT=130-139, and cause E1=1)				

PART VI: FIRE SERVICE EXPOSURES AND INJURIES

Total number of firefighters that were exposed to infectious diseases (hepatitis, meningitis, HIV, other) for year (severity 1, cause 4, and object 25, 51): _____

Total number of firefighters that were exposed to hazardous conditions (asbestos, chemicals, fumes, radioactive materials, other) (severity 1, cause 4, and object 41, 52, 53, 56): _____

Total number of nonfatal firefighter injuries (not exposures) during all types of duty (severity 1 (not exposures), and severity 2 thru 6): _____

On-Duty Fire Fighter Injuries (not exposures to infectious diseases) by Type of Duty, and Nature of Most Serious Injury

Departments using NFIRS 5.0 should include results on cases where severity is 1 (not exposures), and severity is 2 thru 6. Primary apparent symptom (PAS) codes are noted in parenthesis for each category. At non-fire emergencies includes EMS and rescue calls, and hazardous condition calls, while other on-duty includes inspection and maintenance duties.

Nature of Most Serious Injury (Primary Apparent Symptom (PAS) codes in parenthesis)	Type of Duty				
	(A) Responding to or Returning from Incidents	(B) At the Fire Ground	(C) At Non-Fire Emergencies	(D) Training	(E) Other On-Duty
1. Burns (PAS 12, 13, 14, 15)					
2a. Smoke or Gas Inhalation (PAS 01, 02)					
2b. Other Respiratory Distress (PAS 03, 44, 64, 65)					
3. Burn and Smoke Inhalation (PAS 11)					
4. Wound, Cut, Bleeding, Bruise (PAS 21-25, 35, 36, 72, 73)					
5. Dislocation, Fracture (PAS 31, 32, 63)					
6. Heart Attack or Stroke (PAS 41, 42, 43)					
7. Strain, Sprain, Muscular Pain (PAS 33, 34, and 98)					
8. Thermal Stress (frostbite, heat exhaustion) (PAS 57, 83-85)					
9. Other (PAS All other codes)					
10. TOTAL					

Other (please specify): _____

FIREGROUND INJURIES BY CAUSE

In the following table, include injuries that occurred at the fireground as reported in column B above. Report the number of injuries that occurred at the fireground by cause, based on the initial factor leading to the injury. Departments using NFIRS 5.0 can find cause and object involved in injury codes in parentheses.

- 1. Exposure to Fire Products (cause 4, object 47-49, 53, 64) _____
- 2. Exposure to Chemicals or Radiation (cause 4, object 52, 56) _____
- 3. Fall, jump, slip, trip (cause 1 to 3) _____
- 4. Overexertion, strain (cause 7) _____
- 5. Contact with object (cause 6) _____
- 6. Struck by (cause 5) _____
- 7. Extreme weather (cause 4, object 62) _____
- 8. Other _____

Please report the number of injuries that resulted in lost time (severity 4 thru 6): _____

How many shifts were lost as a result of these injuries? _____

FIRE DEPARTMENT VEHICLE ACCIDENTS

Please report below the number of accidents involving fire department emergency vehicles or fire fighter's personal vehicles while responding to or returning from incidents. (If none, report 0).

Accidents involving fire department emergency vehicles: _____ Resulting fire fighter injuries: _____
 Accidents involving fire fighter's personal vehicles: _____ Resulting fire fighter injuries: _____