



NATIONAL FIRE PROTECTION ASSOCIATION

The leading information and knowledge resource on fire, electrical and related hazards

Questions?

Don't hesitate to contact us:

Toll Free: 1-800-343-8890

Fax: 1-617-984-7478

TO SAVE YOUR ANSWERS:

Close your browser **at any time** while taking the survey; your answers will be saved automatically.

When you login to the survey again, you will return to where you left off.

TO PRINT YOUR ANSWERS:

Click the **Print** button at the bottom of the page.

ENTERING NUMBERS: no commas or symbols (\$, %)

Please verify the name and contact information for the Fire Chief:

Fire Chief Name: [No Reply]

Fire Chief email: [No Reply]

Fire Chief phone: [No Reply]

Organization: OLATHE FIRE DEPARTMENT 1225

Address 1: SOUTH HAMILTON CIRCLE

City, State, Zip: OLATHE, KS [No Reply]

Is this information correct?

Yes No

Please provide the correct contact information below.

Fire Chief first name	<input type="text" value="Jeff"/>
Fire Chief last name	<input type="text" value="DeGraffenreid"/>
Fire Chief email	<input type="text"/>
Fire Chief phone	<input type="text" value="913-971-7900"/> <input type="text" value="xxx-xxx-xxxx"/>
Organization	<input type="text" value="OLATHE FIRE DEPARTMENT"/>
Address1	<input type="text" value="1225 SOUTH HAMILTON CIRCLE"/>
Address2	<input type="text" value="66061"/>
City	<input type="text" value="OLATHE"/>
State	<input type="text" value="KS"/>
Zip code	<input type="text" value="66061"/>
Name of person completing form	<input type="text" value="Kristine Martin"/>
Rank / Title	<input type="text" value="Fire Analyst"/>
NFIRS FDID	<input type="text"/>
E-mail address	<input type="text"/>
Phone	<input type="text" value="913-971-7900"/>

Would your Fire Chief like to share your 2015 Fire Experience Survey results with your state Fire Marshal or NFIRS manager?

Yes No Prefer not to answer

Many questions in this survey require numeric responses (e.g., dollar amounts, percentages, etc.). *Do not use symbols (% or \$) or punctuation (commas, decimal points) when answering a question requiring a numeric response.* Enter the numerals only, or you will get an error message instructing you to enter a valid response.

NOTE: *It is extremely important that data not available can be distinguished from zero.* For example, if your department had no civilian fire deaths, report 0, *do not leave blank.* *Only in instances of unavailable data should an answer box be left empty.* At the bottom of each page, you will be asked to confirm that any fields left empty do indicate data is unavailable for that question. This question cannot be skipped. *Example:*

Confirm data is complete, or unavailable for any field(s) above left empty.

Fire Service Personnel.

Number of firefighters: As of 12/31/2015, if actual average strength over the year differed from authorized strength, give the actual figure. Count all firefighters, regardless of assignment. For volunteers, please report active members (involved in fire fighting) only.

Number of **Full-time (career)** Uniform Firefighters:

→

How many are female?

must be <= the number of Full-time Uniform Firefighters

Number of **Active Part-time (call or volunteer)** Firefighters:

→

How many are female?

must be <= the number of Active Part-time Firefighters

If you have part-time firefighters, are they compensated for their time?

Yes

No

Confirm data is complete, or is unavailable for any field(s) above left empty.

Number of all **Firefighters** by Age Group (Career, Call, or Volunteer):

Under 20	<input type="text" value="0"/>
20 - 29	<input type="text" value="15"/>
30 - 39	<input type="text" value="36"/>
40 - 49	<input type="text" value="48"/>
50 - 59	<input type="text" value="19"/>
60 and Over	<input type="text" value="0"/>
Unknown	<input type="text" value="0"/>
TOTAL Firefighters	<input type="text" value="118"/> <i>should sum to 118 (total from previous page)</i>

Confirm data is complete, or unavailable for any field(s) above left empty.

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 2015 is requested.

Does the data reported on this form cover the time period January 1, 2015 to December 31, 2015?

Yes

No

- Report fire experience only for areas where you had primary responsibility. Do not include areas where you had mutual aid or assistance responsibilities.**

- If the answer to a given question is zero, enter the numeral 0. For questions that require a numeric response (for example, dollar amounts) enter numbers only. Do not enter symbols (\$, %), commas, or decimal points.

- If you do not keep the records necessary to answer a question—data is not available—leave the box empty.

Definitions.

These definitions will be available throughout the survey as pop-ups (by hovering over the term in purple font with your cursor).

Civilian Casualties: The term “civilian” should include anyone other than a firefighter and covers public service personnel, such as police officers, civil defense staff, non-fire service medical personnel, and utility company employees.

Injury: Physical damage suffered by a person as a direct result of fire and that requires (or should require) treatment by a practitioner of medicine (physician, nurse, paramedic, EMT) within one year of the incident (regardless of whether treatment was actually received), or results in at least one day of restricted activity immediately following the incident.

Death: An injury that occurred as a direct result of a fire and that is fatal or becomes fatal within one year.

Incident: The movement of a piece of fire service apparatus or equipment in response to an alarm.

Fires: Any instance of uncontrolled burning. Include combustion explosions and fires out on arrival. Exclude controlled burning (whether authorized or not), overpressure rupture without combustion, mutual aid responses, smoke scares, and hazardous condition responses (e.g., oil spill without fire).

Mutual Aid or Assistance: Any assistance rendered to another fire department in an area that is not your primary responsibility.

Structure: An assembly of materials forming a construction for occupancy or use in such a manner as to serve a specific purpose. A building is a form of a structure. Open platforms, bridges, roof assemblies over open storage or process areas, tents, air-supported structures, and grandstands are other forms of a structure.

Fires in Highway Vehicles and Other Vehicles: Fires in these instances may have been associated with an accident; *however, casualties and property loss reported should be the direct result of the fire only.* Highway vehicles include any vehicle designed to normally operate on highways, e.g., automobiles, motorcycles, buses, trucks, trailers (not mobile homes on foundations), etc. Other vehicles include trains, boats and ships, aircraft, farm, and construction vehicles.

Property Damage and Contents: Give your best estimate for overall direct loss – loss of contents, structure, machinery, a vehicle, vegetation (like crops or forest plantations or woodlands) or anything else involved in the fire. Fire loss includes contents damage by fire, smoke, water and overhaul. Construction cost resources and references such as the [ICC Building Valuation Data \(BVD\) formula \(construction types\)](#) or [RS Means Cost data](#) can be used in this fire loss calculation. Do not include indirect losses, such as business interruption, or temporary. When a value is not known, it is preferable to leave the fields blank.

PART I: Population and Area Protected of Primary Responsibility and Community Type Protected

Report the number of people (permanent residents) and the area you had primary responsibility to protect during 2015. Do not count populations or areas to which you responded under mutual aid or assistance agreements. Include populations of neighboring areas only if you had primary responsibility for their fire protection. Do not include seasonal populations (e.g., vacationers), or daytime working populations.

Number of people (permanent residents) your department had *primary responsibility* to protect during 2015: (exclude *mutual aid* areas)

Area protected in square miles your department had *primary responsibility* to protect during 2015: (exclude *mutual aid* areas)

Please check *the one box* that best describes the community and population you had primary responsibility to protect during 2015.









- a portion of a city or town
- a whole city or town
- a township
- a whole city or town plus surrounding areas or communities
- a major portion of a county
- an entire county
- other

Percentage of population protected that lives in an unincorporated area (e.g., 0%, 12%, 100%): %

Confirm data is complete, or unavailable for any field(s) above left empty.

PART II: Major Fires

Please list below all multiple-death fires (3 or more deaths), and all large-loss fires (\$1 million or more) that occurred in 2015. If none, please list below the three highest loss of life fires (if any) during 2015 and also the three fires with the highest property damage.

Date mm/dd/yyyy	Name Of Occupant or Owner, Property Use, and Address (e.g., Smith Dwelling, 119 Pleasant St., or Central Building Supply Co., 112 Main St.)	Number of	
		Civilian Fire Deaths	Property Loss (\$)
04/13/2015	Black Bob Corners, 13415 S Black Bob Road, Olathe, KS 66062	0	2200000
05/17/2015	Olathe T-shirt and Trophy, 900 N Mart-way DR, Olathe, KS 66061	0	1150000
			
			
			
			
			
			
			
			

Confirm data is complete, or unavailable for any field(s) above left empty.

PART III: Breakdown of Structure Fires and Other Fires and Incidents

Departments using NFIRS 5.0 will find incident type (IT), and the [Property Use \(PU\) codes](#) for each category in parentheses. For lines 1 to 13, Section A structure fires include incident type 110–129.

Fires in STRUCTURES by Property Use (Occupancy)
(all in Section A are Incident Type 110-129)

	Number of Fires	Number of Civilian Fire Casualties (if none, enter 0) Deaths	Number of Civilian Fire Casualties (if none, enter 0) Injuries	Estimated Property Damage and Contents from Fire (\$) (if no loss, enter 0)
1. Private Dwellings (1 or 2 family), including mobile homes (PU 419)	60	0	3	1189854
2. Apartments (3 or more families) (PU 429)	17	0	1	254720
3. Hotels and Motels (PU 449)	0	0	0	0
4. All Other Residential (dormitories, boarding houses, tents, etc.) (PU 400, 439, 459–499)	1	0	0	100000
TOTAL RESIDENTIAL FIRES <i>(Sum of lines 1 through 4)</i>	78	0	4	1544574
5. Enter the TOTAL RESIDENTIAL FIRES number from the yellow box above	78	0	4	1544574
6. Public Assembly (church, restaurant, clubs, etc.) (PU100–199)	3	0	0	1750

7.	Schools and Colleges (PU 200-299)	1	0	0	2
8.	Health Care and Penal Institutions (hospitals, nursing homes, prisons, etc.) (PU 300-399)	1	0	0	0
9.	Stores and Offices (PU500-599)	7	0	0	3403000
10.	Industry, Utility, Defense, Laboratories, Manufacturing (PU 600-799)	3	0	0	2500
11.	Storage in Structures (barns, vehicle storage garages, general storage, etc.) (PU 800-899)	2	0	0	10000
12.	Other Structures (outbuildings, bridges, etc.) (PU 900-999)	0	0	0	0
TOTALS FOR STRUCTURE FIRES (Sum of lines 5 through 12)		95	0	4	4961826
13.	Enter the TOTAL STRUCTURE FIRES number from the yellow box above	95	0	4	4961826
14a.	Fires in Highway Vehicles (autos, trucks, buses, etc.) (IT 131-132, 136-137)	41	0	0	224703
14b.	Fires in Other Vehicles (planes, trains, ships, construction or farm vehicles, etc.) (IT 130, 133-135, 138)	2	0	0	75000
15.	Fires outside of Structures with Value Involved, but Not Vehicles (outside storage, crops, timber, etc.) (IT 140-141, 161-164, 170-173)	18	0	0	151
16.	Fires in Brush, Grass, Wildland (excluding crops and timber), with no value involved. (IT 142-143)	42	0		
17.	Fires in Rubbish, Including Dumpsters (outside of structures), with no value involved. (IT 151-154, 155, 150)	32	0		
18.	All Other Fires. (IT 163, 160, 100)	4	0	0	5
TOTALS FOR FIRES (Sum of lines 13 through 18)		234	0	4	5261685
19.	Enter the TOTALS FOR FIRES number from the yellow box above	234			
20.	Rescue, Emergency Medical Responses (ambulance, EMS, rescue) (IT 311, 321, 322-331, 351-355, 356-364, 360, 365, 370-372, 381, 300)	6840			
21.	False Alarm Responses (malicious or unintentional false calls, malfunctions, bomb scares) (IT 711-713, 714-721, 731-735, 736-743, 740-746, 700)	755			
22.	Mutual Aid Responses Given	213			
23a.	Hazardous Materials Responses (spills, leaks, etc.) (IT 410-412, 413-423, 431, 430)	246			
23b.	Other Hazardous Responses (arcing wires, bomb removal, power line down, etc.) (IT 440-461, 460-471, 480-482, 400)	195			
24.	All Other Responses (smoke scares, lock-outs, animal rescues, etc.) (IT 210-223, 220, 231, 241, 240-251, 200, 240-251, 200, 510-522, 531-552, 550-561, 571, 500, 611-622, 631, 632, 641, 650-653, 661-672, 600, 811-815, 800, 911)	2016			
25.	TOTAL FOR ALL INCIDENTS (Sum of lines 19 through 24)	10499			

Confirm data is complete, or unavailable for any field(s) above left empty.

Based on what is reported on the previous page in lines 5 and 13 for number of fires, 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 113-115, 116-118), and **Nonconfined fires** (IT 111, 112, 120, 121, 122, 123).

5. Residential Fires (line 5 previous page)	Number of Confined Fires	+	Number of Nonconfined Fires	should sum to 78
	20		58	
13. Structure Fires (line 13 previous page)	Number of Confined Fires	+	Number of Nonconfined Fires	should sum to 95
	25		70	

Confirm data is complete, or unavailable for any field(s) above left empty.

PART IV: BREAKDOWN OF FALSE ALARM RESPONSES

Please report separately below a further breakdown on false alarm responses reported previously in **Part III**, item **21 (755)**. If data for this section is "Not Available", please leave empty.

Type of False Alarm

	Number of Incidents
1. Malicious, Mischievous False Call (IT 711–713, 714, 715, 710)	18
2. System Malfunction (IT 731–733, 734–736, 730)	236
3. Unintentional (tripping on interior device accidentally, etc.) (IT 741–743, 744–746, 740)	483
4. Other False Alarms (bomb scares, etc.) (IT 721, 751, 700)	18
5. TOTAL should equal 755 (as previously reported in Part III , item 21)	755

Confirm data is complete, or unavailable for any field(s) above left empty.

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 <small>(if none, enter 0)</small> Deaths	Number of Civilian Fire Casualties <small>(if none, enter 0)</small> Injuries	Estimated Property Damage and Contents from Fire (\$) <small>(if no loss, enter 0)</small>
1. Structure Fires Intentionally set (IT=111, 112, 113, 114, 115, 116, 117, 118, 120, 121, 122, 123 and cause E1=1)	1	0	0	1000
2. Vehicle Fires Intentionally set (IT=130–132, 133–135, 136, 137, 138, and cause E1=1)	0	0	0	0

Confirm data is complete, or unavailable for any field(s) above left empty.

PART VI: Fire Service Exposures and Injuries

Total number of firefighters that were exposed to infectious diseases (hepatitis, meningitis, HIV, other) in 2015: (severity 1, cause 4, and object 25, 51) 0

Total number of firefighters that were exposed to hazardous conditions (asbestos, chemicals, fumes, radioactive materials, other) in 2015: (severity 1, cause 4, and object 41, 52, 53, 56) 0

Total number of nonfatal firefighter injuries (not exposures) during all types of duty in 2015: (severity 1 (not exposures), and severity 2 thru 6) 16

Confirm data is complete, or unavailable for any field(s) above left empty.

On-Duty Firefighter Injuries (not exposures) 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)

(A) Responding to or Returning from Incidents	(B) At the Fireground	(C) At Non-Fire Emergencies	(D) Training	(E) Other On-Duty
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1. Burns (PAS 12–15)					
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)					1
5. Dislocation, Fracture (PAS 31, 32, 63)					
6. Heart Attack or Stroke (PAS 41, 42, 43)					
7. Strain, Sprain, Muscular Pain (PAS 33, 34, 98)		2	4	3	1
8. Thermal Stress (frostbite, heat exhaustion) (PAS 57, 83–85)					
9. Other* (PAS All other codes)		1	2	1	1
10. TOTAL		3	6	4	3

*Other (please specify)

Confirm data is complete, or unavailable for any field(s) above left empty.

Fireground Injuries By Cause.

In the following table, include injuries that occurred at the fireground as reported in **Column B** on the previous page. 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 1–3)	1
4. Overexertion, strain (cause 7)	1
5. Contact with object (cause 6)	
6. Struck by (cause 5)	
7. Extreme weather (cause 4, object 62)	
8. Other	1
TOTAL should equal 3 (as reported on the previous page in Row 10, Column B (Total Injuries "At the Fire Ground"))	3

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

If there were injuries that resulted in lost time, how many hours were lost as a result of these injuries? If there were no injuries resulting in lost time, leave this field blank.

Confirm data is complete, or unavailable for any field(s) above left empty.

Fire Department Vehicle Crashes.

Please report below the number of crashes involving fire department emergency vehicles or firefighter's personal vehicles while responding to or returning from incidents in 2015. *(If none, report 0)*

Crashes involving fire department emergency vehicles:

Resulting firefighter injuries:

Crashes involving firefighter's personal vehicles:

Resulting firefighter injuries:

Confirm data is complete, or unavailable for any field(s) above left empty.

PRINT (optional) BEFORE SUBMIT!

(if you do not want to Print, click Next to view [submit instructions](#))

PRINT INSTRUCTIONS:

- 1) To print all answers to your survey, first click the **Print** button below.
- 2) A new page will load showing your responses.
- 3) Print that page using your browser's print tool.
- 4) **Close the page you have printed, then click Next below to move to the *Submit* page.**

*Consider posting your results on your Fire Departments website or share with your local government partners.
Print to .pdf to save an electronic version of this report.*

— END SURVEY —

Thank you!
Your time is much appreciated.

YOU MUST CLICK SUBMIT!

INSTRUCTIONS :

- 1) **Once you click Submit, your responses are final and cannot be changed.**
- 2) Click **SUBMIT** below then wait for the NFPA web page to show.
- 3) When the NFPA web page shows, all of your responses have been transmitted and recorded.