BRITISH COLUMBIA
The Best Place on Earth

Ministry of Public Safety and Solicitor General

VEHICLE FIRE REPORT

INCIDENT NUMBER					
LOCATION	YEAR	MONTH	DAY	HOUR	OCC

TO CHANGE A PREVIOUS REPORT, MARK APPROPRIATE BOX

☐ DELETE ☐ UPDATE

☐ RELATED TO WILDLAND/URBAN INTERFACE

OFFICE OF THE FIRE COMMISSIONER
PO Box 9491 Stn. Prov. Govt.
VICTORIA BC V8W 9N7
TEL (250)356-9000 FAX (250)356-9019

LOCATION OF FIRE INCIDENT (SUITE, NUMBER, STREET, CITY)	POSTAL CODE

THE FOLLOWING SECTION REFERS TO SELECTED STATUS:

☐ OWNER ☐ BUSINESS OWNER ☐ OCCUPANT ☐ BUSINESS OCCUPANT	SURNAME	GIVEN NAME(S)
BUSINESS NAME		
ADDRESS	POSTAL CODE	TELEPHONE ( )
PROPERTY LOSS	CONTENTS LOSS	TOTAL LOSS TO NEAREST DOLLAR
CLAIMS ADJUSTER NAME	FIRM	CLAIM NO.
INSURANCE COMPANY NAME		POLICY NO.

PROPERTY CLASSIFICATION - PR	MANUAL FIRE PROTECTION - MF	TRANSMISSION OF ALARM - AL	FIRE SERVICE - FS
INCIDENT - IN	ACTION TAKEN - AC	METHOD OF FIRE CONTROL - EX	FIRE ORIGIN, AREA - OA
EXTENT OF FIRE - XF	IGNITING OBJECT - IG	FUEL OR ENERGY - FU	FORM OF HEAT - FH
MATERIAL FIRST IGNITED - MI	ACT OR OMISSION - AO		

NO. OF OCCUPANTS (AT TIME OF FIRE)	TOTAL INJURIES	TOTAL FATALITIES

THE FOLLOWING SECTION REFERS TO PRODUCT/EQUIPMENT RELATED TO IGNITION SOURCE:

ITEM TYPE	MAKE	MODEL	YEAR	SERIAL NO.

PROPERTY VALUE AT RISK (FOR INCIDENT)	CONTENTS VALUE AT RISK (FOR INCIDENT)	TOTAL VALUE AT RISK (FOR INCIDENT)

REMARKS: EXPLAIN CIRCUMSTANCES UNDER WHICH FIRE ORIGINATED.

NAME OF INVESTIGATOR (PLEASE PRINT)	LAFC BADGE NUMBER (IF APPLICABLE)	TELEPHONE	REPORT DATE (YYYY/MM/DD)
		( )	/ /