Massachusetts State Fire Marshal's Office
Smoke Alarm Worksheet
[redacted] **Information in Bold.)**

Date of Fire: 08/16/2011 Time of Alarm: 02:47

Address of Fire: [redacted]

Smoke Alarms Present? ✓ Y ____ N (*Indicate location(s) on attached sketch)*

- **Inside Room of Origin?** ____ **Y** ✓ **N**
- **Outside Room of Origin but on the Same Floor?** ✓ **Y** ~~X~~ SD **N**
- **Outside Room of Origin but on the Same Floor?** ____ **Y** ____ **N**
- **Outside Unit of Origin but in Building?** ____ **Y** ____ **N**

Did the Unit appear to be properly powered? (Answer for each smoke alarm.)

➢ **Smoke Alarm Location:** LIVING ROOM **(Nearest)** (SEE NOTES)
- **Was smoke alarm properly wired to ceiling?** ____ **Y** ____ **N** ____ **N/A**
- **Did Smoke Alarm have a working battery in place?** ____ **Y** ____ **N**

➢ **Smoke Alarm Location:** UPPER SPLIT-LEVEL HALL **(Next Nearest)**
- **Was smoke alarm properly wired to ceiling?** ____ **Y** ____ **N** ✓ **N/A**
- **Did Smoke Alarm have a working battery in place?** ✓ **Y** ____ **N**

➢ **Smoke Alarm Location:** BEDROOM #4
- **Was smoke alarm properly wired to ceiling?** ____ **Y** ____ **N** ✓ **N/A**
- **Did Smoke Alarm have a working battery in place?** ✓ **Y** ____ **N**

➢ **Smoke Alarm Location:** BEDROOM #3
- **Was smoke alarm properly wired to ceiling?** ____ **Y** ____ **N** ✓ **N/A**
- **Did Smoke Alarm have a working battery in place?** ✓ **Y** ____ **N**

Did Smoke Alarm operate? (Check with first arriving FD/PD units, other occupants, and neighbors)

- **Did occupants inside unit of origin hear it?** ✓ **Y** ____ **N**
- **Did occupants outside unit of origin but in building hear it?** ____ **Y** ____ **N**
- **Did anyone outside building hear it?** ____ **Y** ✓ **N**
- **Did firefighters hear smoke alarm in unit of origin?** ____ **Y** ✓ **N**
- **Did firefighters hear alarms outside unit of origin?** ____ **Y** ✓ **N**
- **Was the fire so advanced that smoke alarm may have melted at time of FD arrival?**
  ____ **NOT SURE** ✓ **Y** ____ **N**

Massachusetts State Fire Marshal's Office
Smoke Alarm Worksheet
[redacted] **Information in Bold.)**

Date of Fire: _____ Time of Alarm: _____

Address of Fire:

Smoke Alarms Present? ___Y ____N (*Indicate location(s) on attached sketch)*

- **Inside Room of Origin? _____Y _____N**
- **Outside Room of Origin but on the Same Floor? _____Y _____N**
- **Outside Room of Origin but on the Same Floor? _____Y _____N**
- **Outside Unit of Origin but in Building? _____Y _____N**

Did the Unit appear to be properly powered? (Answer for each smoke alarm.)

- **Smoke Alarm Location:** MASTER BEDROOM **(Nearest)**
  - **Was smoke alarm properly wired to ceiling? ____Y ____N ✓ N/A**
  - **Did Smoke Alarm have a working battery in place? ✓ Y ____N**
- **Smoke Alarm Location:** GARAGE **(Next Nearest)**
  - **Was smoke alarm properly wired to ceiling? ____Y ____N ✓ N/A**
  - **Did Smoke Alarm have a working battery in place? ____Y ✓ N**
- **Smoke Alarm Location:** BASEMENT
  - **Was smoke alarm properly wired to ceiling? ____Y ____N ✓ N/A**
  - **Did Smoke Alarm have a working battery in place? ✓ Y ____N**
- **Smoke Alarm Location: _____**
  - **Was smoke alarm properly wired to ceiling? ____Y ____N ____N/A**
  - **Did Smoke Alarm have a working battery in place? ____Y ____N**

Did Smoke Alarm operate? (Check with first arriving FD/PD units, other occupants, and neighbors)

- **Did occupants inside unit of origin hear it? _____Y _____N**
- **Did occupants outside unit of origin but in building hear it? _____Y _____N**
- **Did anyone outside building hear it? _____Y _____N**
- **Did firefighters hear smoke alarm in unit of origin? _____Y _____N**
- **Did firefighters hear alarms outside unit of origin? _____Y _____N**
- **Was the fire so advanced that smoke alarm may have melted at time of FD arrival?**
  ____NOT SURE _____Y _____N

Smoke Alarm Information

Note: If multiple types of smoke alarms in building fill out this information for each type. For example: there could be different types of smoke alarm on different floors of a single family house or there could be battery powered in apartments with hard-wired in hallways.

Alarm Manufacturer/Brand Name: KIDDE

Alarm Make/Model Name or Number: MODEL 0916

Alarm Type: ✓ Smoke ___ Heat ___ CO ___ Heat ___ Combination

Smoke Detection Method: ✓ Ionization ___ Photoelectric ___ Combination units

Alarm Power Source: ✓ Battery ___ 120v hardwire ___ 120v plug-in

___ Low voltage system ___ 120v with battery backup

Were alarms interconnected? (3 wires): ___ Y ✓ N

Power Source Available: (batteries in detector, 120v power on) ✓ Y ___ N

Condition of Circuit Breaker (Alarm Circuit): N/A

Post-fire condition of alarm(s) (Attach photos if possible.): DETECTOR MELTED, NOT OPERATIONAL.

Distance to Kitchen: ~30' **(feet)** **Distance to Bathroom** 10 **(feet)**

Was there a closed door between the fire and smoke alarm? ___ Y ✓ N **(If yes explain below.)**

ADDITIONAL NOTES (factors that might help explain outcome): DETECTOR LOCATED IN MASTER BEDROOM. BATTERY VOLTAGE > 8 VOLTS. DETECTOR DATED 11/11/2004.

Investigator (1): _____ Date: _____

Investigator (2): _____ Date: _____

Drawing of: _____

Smoke Alarm Information

Note: If multiple types of smoke alarms in building fill out this information for each type. For example: there could be different types of smoke alarm on different floors of a single family house or there could be battery powered in apartments with hard-wired in hallways.

Alarm Manufacturer/Brand Name: UNKNOWN

Alarm Make/Model Name or Number: UNKNOWN

Alarm Type: ✓Smoke ___Heat ___CO ___Heat ___Combination

Smoke Detection Method: ✓Ionization ___Photoelectric ___Combination units

Alarm Power Source: ✓Battery ___120v hardwire ___120v plug-in

___Low voltage system ___120v with battery backup

Were alarms interconnected? (3 wires): ___Y ✓N

Power Source Available: (batteries in detector, 120v power on) ✓Y ___N

Condition of Circuit Breaker (Alarm Circuit): N/A

Post-fire condition of alarm(s) (Attach photos if possible.): DESTROYED BEYOND ~~REC~~ RECOGNITION.

Distance to Kitchen: 20 **(feet)** **Distance to Bathroom** w/i 5 **(feet)**

Was there a closed door between the fire and smoke alarm? ___Y ✓N **(If yes explain below.)**

ADDITIONAL NOTES (factors that might help explain outcome): LOCATED ON FLOOR ON UPPER SPLIT-LEVEL HALLWAY.

Investigator (1): _____ Date: _____

Investigator (2): _____ Date: _____

Drawing of: _____

Smoke Alarm Information

Note: If multiple types of smoke alarms in building fill out this information for each type. For example: there could be different types of smoke alarm on different floors of a single family house or there could be battery powered in apartments with hard-wired in hallways.

Alarm Manufacturer/Brand Name: FAMILY GARD (BRK)

Alarm Make/Model Name or Number: MODEL FG2000

Alarm Type: ✓Smoke ___Heat ___CO ___Heat ____Combination

Smoke Detection Method: ✓Ionization ____Photoelectric ____Combination units

Alarm Power Source: ✓Battery _____120v hardwire ____120v plug-in

____Low voltage system ____120v with battery backup

Were alarms interconnected? (3 wires): ____Y ✓N

Power Source Available: (batteries in detector, 120v power on) ✓Y ___N

Condition of Circuit Breaker (Alarm Circuit): N/A

Post-fire condition of alarm(s) (Attach photos if possible.): DETECTORS MELTED, NON-OPERATIONAL

Distance to Kitchen: 30 **(feet)** **Distance to Bathroom** 10 **(feet)**

Was there a closed door between the fire and smoke alarm? ___Y ✓N **(If yes explain below.)**

ADDITIONAL NOTES (factors that might help explain outcome): DETECTORS MOUNTED ABOVE DOORS INSIDE BEDROOMS #3 & #4. BATTERY VOLTAGE > 8-VOLTS. BOTH DETECTORS DATED 01/11/2008

Investigator (1): _____ Date: _____

Investigator (2): _____ Date: _____

Drawing of: _____

Smoke Alarm Information

Note: If multiple types of smoke alarms in building fill out this information for each type. For example: there could be different types of smoke alarm on different floors of a single family house or there could be battery powered in apartments with hard-wired in hallways.

Alarm Manufacturer/Brand Name: UNKNOWN

Alarm Make/Model Name or Number: UNKNOWN

Alarm Type: ✓ Smoke ___ Heat ___ CO ___ Heat ___ Combination

Smoke Detection Method: ✓ Ionization ___ Photoelectric ___ Combination units

Alarm Power Source: ✓ Battery ___ 120v hardwire ___ 120v plug-in

___ Low voltage system ___ 120v with battery backup

Were alarms interconnected? (3 wires): ___ Y ✓ N

Power Source Available: (batteries in detector, 120v power on) ✓ Y ___ N

Condition of Circuit Breaker (Alarm Circuit): N/A

Post-fire condition of alarm(s) (Attach photos if possible.): MELTED BEYOND RECOGNITION.

Distance to Kitchen: 10 **(feet)** **Distance to Bathroom** UNKNOWN **(feet)**

Was there a closed door between the fire and smoke alarm? ___ Y ___ N **(If yes explain below.)**

ADDITIONAL NOTES (factors that might help explain outcome): DETECTOR LOCATED IN DEBRIS BY INSURANCE INVESTIGATOR POST-FIRE OPERATIONS. STATED DETECTOR CONTAINED BATTERY, UNKNOWN FUNCTION OR BATTERY CONDITION. DETECTOR LOCATED IN LIVING ROOM.

Investigator (1): _____ Date: _____

Investigator (2): _____ Date: _____

Drawing of: _____

Smoke Alarm Information

Note: If multiple types of smoke alarms in building fill out this information for each type. For example: there could be different types of smoke alarm on different floors of a single family house or there could be battery powered in apartments with hard-wired in hallways.

Alarm Manufacturer/Brand Name: [redacted]

Alarm Make/Model Name or Number: UNKNOWN

Alarm Type: ✓ Smoke ___ Heat ___ CO ___ Heat ___ Combination

Smoke Detection Method: ✓ Ionization ___ Photoelectric ___ Combination units

Alarm Power Source: ✓ Battery ___ 120v hardwire ___ 120v plug-in

___ Low voltage system ___ 120v with battery backup

Were alarms interconnected? (3 wires): ___ Y ✓ N

Power Source Available: (batteries in detector, 120v power on) ___ Y ✓ N

Condition of Circuit Breaker (Alarm Circuit): N/A

Post-fire condition of alarm(s) (Attach photos if possible.): NOT INVOLVED IN FIRE. NO BATTERY, NOT OPERATIONAL.

Distance to Kitchen: 20 **(feet)** **Distance to Bathroom** 30 **(feet)**

Was there a closed door between the fire and smoke alarm? ✓ Y ___ N **(If yes explain below.)**

ADDITIONAL NOTES (factors that might help explain outcome): DETECTOR LOCATED IN GARAGE OF LOWER SPLIT-LEVEL, AREA NOT INVOLVED IN FIRE. DOOR BETWEEN GARAGE & FAMILY ROOM / WALK-OUT CLOSED.

Investigator (1): _____ Date: _____

Investigator (2): _____ Date: _____

Drawing of: _____

Smoke Alarm Information

Note: If multiple types of smoke alarms in building fill out this information for each type. For example: there could be different types of smoke alarm on different floors of a single family house or there could be battery powered in apartments with hard-wired in hallways.

Alarm Manufacturer/Brand Name: UNKNOWN

Alarm Make/Model Name or Number: UNKNOWN

Alarm Type: ✓Smoke ___Heat ___CO ___Heat ___Combination

Smoke Detection Method: ✓Ionization ___Photoelectric ___Combination units

Alarm Power Source: ✓Battery ___120v hardwire ___120v plug-in

___Low voltage system ___120v with battery backup

Were alarms interconnected? (3 wires): ___Y ✓N

Power Source Available: (batteries in detector, 120v power on) ✓Y ___N

Condition of Circuit Breaker (Alarm Circuit): N/A

Post-fire condition of alarm(s) (Attach photos if possible.): NOT INVOLVED IN FIRE, NOT OPERATIONAL.

Distance to Kitchen: 30 **(feet)** **Distance to Bathroom** 40 **(feet)**

Was there a closed door between the fire and smoke alarm? ✓**Y** ___**N** **(If yes explain below.)**

ADDITIONAL NOTES (factors that might help explain outcome): DETECTOR LOCATED IN BASEMENT, AREA NOT INVOLVED, DETECTOR NON-OPERATIONAL. TWO CLOSED DOORS BETWEEN FIRE AREA & DETECTOR.

Investigator (1): SCOTT DETERMANN Date: 08/31/2011

Investigator (2): _____ Date: _____

Drawing of: BASEMENT / LOWER SPLIT LEVEL

[redacted]

Drawing of: MAIN FLOOR / UPPER SPLIT LEVEL

☒ WALL-MOUNTED DETECTORS
(CENTERED ABOVE DOORS)

AREA OF ORIGIN

[redacted]