



**State of Oregon
Juvenile with Fire
Reporting System (10J)**

Please report each fire incident that involved a juvenile.
This form accepts information on up to 4 juveniles per incident.

Update

Check if this is an update of a prior report.

Revised March 1999

Fire Department Name _____ **Contact Person** _____

Date of incident ____/____/____ **Time of incident** _____ **Date of report** ____/____/____
(Date and time may be unknown if child is brought in for fire play incidents / unreported fires.)

Alarm # _____ (if the fire was reported)

Incident Address _____
street city county zip

	Juvenile #1	Juvenile #2	Juvenile #3	Juvenile #4
AGE	_____	_____	_____	_____
GENDER	M <input type="checkbox"/> F <input type="checkbox"/>	M <input type="checkbox"/> F <input type="checkbox"/>	M <input type="checkbox"/> F <input type="checkbox"/>	M <input type="checkbox"/> F <input type="checkbox"/>
Referred for screening or intervention?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>

<p>(Specific property use)</p> <p>Where did the incident take place?</p> <p><input type="checkbox"/> (411) Single family home <input type="checkbox"/> (420) Apartment <input type="checkbox"/> (092) Vehicle <input type="checkbox"/> (930) Wildland <input type="checkbox"/> (933) Yard/park/landscaping <input type="checkbox"/> (936) Vacant lot <input type="checkbox"/> (962) Street/alley/sidewalk <input type="checkbox"/> (210) School <input type="checkbox"/> (910) Dumpster/trash <input type="checkbox"/> (131) Church <input type="checkbox"/> (500) Commercial building <input type="checkbox"/> (923) Mailbox <input type="checkbox"/> (400) Other type residence <input type="checkbox"/> (091) Other structure <input type="checkbox"/> Other (describe)</p> <p>Room/area of origin: _____</p>	<p>What material was ignited or attempted? *</p> <p><input type="checkbox"/> (11) Lighter play <input type="checkbox"/> (12) Match play <input type="checkbox"/> (13) Paper, tissue, cardboard <input type="checkbox"/> (14) Bedding, bed <input type="checkbox"/> (15) Clothing <input type="checkbox"/> (16) Furniture <input type="checkbox"/> (17) Part of a building <input type="checkbox"/> (18) Flammable liquids/aerosols <input type="checkbox"/> (19) Fireworks/explosives <input type="checkbox"/> (20) Toys <input type="checkbox"/> (21) Trash, leaves, grass, twigs <input type="checkbox"/> (22) Bushes, trees, shrubs <input type="checkbox"/> (23) Agricultural crops <input type="checkbox"/> (24) Wildland <input type="checkbox"/> (25) People, animals, self <input type="checkbox"/> (26) Insects <input type="checkbox"/> (10) Other</p>	<p>(Form of Heat)</p> <p>What was the ignition source?</p> <p><input type="checkbox"/> (15) Stove, gas <input type="checkbox"/> (22) Stove, wood <input type="checkbox"/> (46) Stove, electrical <input type="checkbox"/> (50) Explosive devices (bombs) <input type="checkbox"/> (54) Fireworks <input type="checkbox"/> (64) Matches <input type="checkbox"/> (65) Lighter <input type="checkbox"/> (66) Candles <input type="checkbox"/> (67) Flares <input type="checkbox"/> (91) Multi-purpose lighter (BBQ) <input type="checkbox"/> (99) Other</p> <p>Accelerant used? Y <input type="checkbox"/> N <input type="checkbox"/></p>
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<p>Referral source (choose one for each juvenile)</p> <table border="0"> <tr> <td style="vertical-align: top;"> <p>Juvenile #</p> <p>1 2 3 4</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Parent/guardian <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fire investigator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other fire department <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> SCF <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Law enforcement <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Community mental health</p> </td> <td style="vertical-align: top;"> <p>Juvenile #</p> <p>1 2 3 4</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Juvenile court/department <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> School <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Wildland agency <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Public <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Oregon Youth Authority <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other (describe)</p> </td> </tr> </table>		<p>Juvenile #</p> <p>1 2 3 4</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Parent/guardian <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fire investigator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other fire department <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> SCF <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Law enforcement <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Community mental health</p>	<p>Juvenile #</p> <p>1 2 3 4</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Juvenile court/department <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> School <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Wildland agency <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Public <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Oregon Youth Authority <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other (describe)</p>	<p>Where was the ignition source obtained? *</p> <p><input type="checkbox"/> (11) Home <input type="checkbox"/> (12) Convenience store <input type="checkbox"/> (13) Grocery store <input type="checkbox"/> (14) Other retail store <input type="checkbox"/> (15) Restaurant <input type="checkbox"/> (16) Motel/hotel <input type="checkbox"/> (17) School <input type="checkbox"/> (18) Outdoors <input type="checkbox"/> (10) Other person/friend Other (describe)</p>
<p>Juvenile #</p> <p>1 2 3 4</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Parent/guardian <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fire investigator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other fire department <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> SCF <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Law enforcement <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Community mental health</p>	<p>Juvenile #</p> <p>1 2 3 4</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Juvenile court/department <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> School <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Wildland agency <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Public <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Oregon Youth Authority <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other (describe)</p>			

<p>Instructions Incidents to be reported on this form may be either reported (on Form 10) or unreported (Example: child brought to station by parents.)</p> <p>This form will accept up to 4 juveniles on one incident. In the event that MORE than four children are involved, please use another Form 10J to complete the report.</p> <p>If interventions were provided for the juvenile or juveniles involved, please complete the rest of the form on the back. Mail completed forms (blue paper) to Office of State Fire Marshal, attn: JFS Unit, 4760 Portland Rd. NE, Salem, OR 97305-1760.</p> <p>An update of an incident should be filed on a copy of the original.</p>	<p>Number of previous firesets:</p> <p>Juvenile #1 _____ Juvenile #2 _____ Juvenile #3 _____ Juvenile #4 _____</p> <p>Office use only</p> <p><small>S:/JFSFolder/CarolBFolder/Masters/10J/10JFOR SCREENING.p65</small></p>
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Intervention

**Intervention Provided for each Juvenile
(check all that apply)**

Juvenile #

1 2 3 4

- Parent/child interviews
- Screening instrument completed
- Fire safety education
- Gave smoke alarms*
- Had family complete home escape plan*
- Used curiosity firesetter curriculum*
- Assigned *Community Impact Report**
- Gave *Parents' Legal Responsibility* booklet*
- Referral for mental health intervention
- Referral to Oregon Youth Authority
- Referral to juvenile court/department
- Referral to Services to Children & Families
- Referral to police
- None available
- Family no show
- Family refused service
- Unable to contact

If you used other educational interventions than those listed above, please list:

*Not on 1999 electronic version.

Family Unit Type (for each juvenile)

Juvenile #

1 2 3 4

- Biological parents (living w/birth parents)
- Mother only/single parent (birth mother, no other adults)
- Father only/single parent (birth father, no other adults)
- Step-family (birth parent remarried)
- Adoptive family (single or couple, not birth parents)
- Foster family (single or couple, not birth, agency placed)
- Mother w/partner (birth mother living w/other adult)
- Father w/partner (birth father living w/other adult)
- Grandparents (either side of family)
- Other female relative (birth relative, such as aunt, cousin)
- Other male relative (birth relative, such as uncle, cousin)
- Friends (no family relation)
- Extended family/many relatives (grandparents, uncles, etc.)
- Other (describe)

Notes about incident (optional)

Oregon Juvenile with Fire Screening Tool

Juvenile Interview Score _____

Parent Interview Score _____

Place
stamp
here

Office of State Fire Marshal
attn: JFS Unit
4760 Portland Road NE
Salem Oregon 97305-1760