

## Basic Fire Investigation 100 Firefighter I & II, Fire Officer I JPR Checklist

**Print Student Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**THIS FORM IS FOR YOUR RECORDS AND TO USE AS A REFERENCE WHEN FILLING OUT THE DPPST TASKBOOKS and AS VALIDATION OF COMPLETED SKILLS**

### JPR (NFPA 1001) and FF I, FFII, and Fire Officer I DPSST Task Books:

Upon completion of the classroom portion of this course, the following requisite knowledge (A) boxes may be signed off at the discretion of the lead instructor or Fire Department Training Officer.

- Firefighter I: 5.3.8 (A); 5.3.13 (A); 5.3.14 (A)
- Firefighter II: 6.3.4 (A)
- Fire Officer I: 4.5.1 (A); 4.5.2 (A)

Upon completion of the below Evaluation Checklist certain requisite skill (B) boxes may be signed off at the discretion of the lead instructor or Fire Department Training Officer.

### Directions

For this skills evaluation checklist, students will protect evidence of fire cause and origin. Provide students with a scenario that provides information about the nature of the evidence. Inform students that they and other firefighters are performing overhaul tasks in a structure fire when they notice evidence of fire cause. Students must identify and protect this potential evidence from further damage so that a trained investigator can determine its value.

### Equipment & Materials

- Paper and pencil or pen
- Camera
- Cardboard boxes
- Plastic sheeting
- Items that may indicate fire cause (both intentional and non intentional evidence)

### Skills (B) Evaluation Checklist:

FFI	FFII	Fire Officer I	Task Steps	Yes	No
5.3.8		4.5	<b>Protect potential evidence.</b>	<input type="checkbox"/>	<input type="checkbox"/>
			a. Avoid touching, disturbing, or tramping on evidence.	<input type="checkbox"/>	<input type="checkbox"/>
5.3.8			b. Water application is effective, the fire is extinguished, and signs of the origin area(s) and arson are preserved.	<input type="checkbox"/>	<input type="checkbox"/>
			c. Assess patterns for origin determination	<input type="checkbox"/>	<input type="checkbox"/>
	6.3.4		d. Determine effects and problems associated with removing property or evidence from the scene	<input type="checkbox"/>	<input type="checkbox"/>

5.3.14		4.5	<b>Preserve evidence as necessary.</b> a. Move and protect evidence, for cause determination, only as necessary to preserve it.	<input type="checkbox"/>	<input type="checkbox"/>
	6.3.4		b. Provide security for the evidence until an investigator is available.	<input type="checkbox"/>	<input type="checkbox"/>
5.3.13		4.5.1	<b>Recognize signs of origin and arson and cause determination.</b> a. Fire cause evidence is preserved	<input type="checkbox"/>	<input type="checkbox"/>
			b. Recognize and preserve obvious signs of area of origin and arson	<input type="checkbox"/>	<input type="checkbox"/>
			c. Avoid damage to evidence.	<input type="checkbox"/>	<input type="checkbox"/>
	6.3.4	4.5.1	d. Ability to locate fire's origin and cause using overhaul tools	<input type="checkbox"/>	<input type="checkbox"/>
		4.5.2	<b>Secure Fire Scene</b> a. Given rope or barrier tape secure scene around perimeter and restricted areas	<input type="checkbox"/>	<input type="checkbox"/>
	6.3.4	4.5.1	<b>Record information about evidence.</b> a. Document information about location and appearance of evidence if it must be moved or cannot be preserved.	<input type="checkbox"/>	<input type="checkbox"/>
	6.3.4		b. Initiate chain of custody record if control of evidence is turned over to anyone else.	<input type="checkbox"/>	<input type="checkbox"/>
		4.5.1	c. Provide evidence and records to investigator before leaving incident site.	<input type="checkbox"/>	<input type="checkbox"/>
		4.5.1	<b>Evaluate available information</b> a. Interview first arriving members and other individuals to assist in determining cause	<input type="checkbox"/>	<input type="checkbox"/>
		4.5.1	b. Complete report	<input type="checkbox"/>	<input type="checkbox"/>

**Verification of Training**

Evaluator Name:	Department:
Contact phone:	Email:
BFI 100 computer based learning class Yes <input type="checkbox"/>	No <input type="checkbox"/> Date of BFI 100 Classroom:

\_\_\_\_\_  
Evaluator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date