

BEAVER DAM FIRE DEPARTMENT

Incident Report Form

FIRE/ARSON INVESTIGATION

Incident No.: 1803061
 Address of Incident: 109th Kwaup Dr. Date of Incident 3-5-2018
 Name: Gary L. Peck Rank: FF/CAT Station: BDFD Shift: 2
 Assignment: EMS/EMT Home Phone No.: [REDACTED]

If you answer "Yes" to any of the questions listed below, provide details on the back side of this form. When describing locations, a sketch is most helpful. *Attach additional sheets if necessary.*

		Yes	No	Exterior Observations
A1			✓	Was smoke showing when you arrived?
A2			✓	Was fire showing when you arrived?
A3			✓	Did you see any suspicious persons/activity?
A4			✓	Did you see any persons or vehicles leaving the area as you arrived?
A5			✓	Did obstacles seem to be placed so as to slow building access, entry or system hook up?
A6			✓	Did you notice any footprints, containers, or other evidence outside of the building?
		Yes	No	Building Entry
B1			✓	Were any exterior doors ajar or unlocked when you arrived?
B2	✓			Were any windows open or broken when you arrived?
B3			✓	Did you enter with a key? If "Yes", who provided the key for your use?
B4			✓	Did you use any forcible entry?
B5			✓	Did you see anyone else enter with a key or use forcible entry?
		Yes	No	Interior Information
C1			✓	Did you smell any unusual odors?
C2			✓	Did obstacles seem to be placed in your way?
C3			✓	Did you observe unusual flame colors?
C4			✓	Did you notice any unusual smoke colors?
C5			✓	Did you see separate and unrelated fires?
C6			✓	Did you shut off circuit breakers or remove fuses?
C77			✓	Did you shut off the natural gas supply to the building or any appliance?
C8			✓	Did you unplug, shut off or move any appliances in the room of fire origin?
C9			✓	Did you move any items such as furniture in the room of fire origin?
C10			✓	Did you see anyone perform any of the operations described in C6-C9?

	Yes	No	Fire Alarm Information				
D1	✓		Was the fire alarm sounding when you arrived?				
D2		✓	Could you hear a smoke detector sounding (in the unit where the fire occurred)?				
D3		✓	Did you silence the fire alarm system, or any smoke detectors?				
D4		✓	Did you see anyone silence the fire alarm system, or any smoke detectors?				
A3	Gender:	Age:	Race:	Height:	Weight:	Glasses:	Facial hair:
	Build:	Hair Style:		Clothing (color/type):			
A4	Year:	Make:	Model:	Color:			
	License No.:	State:	Direction of Travel:				
<p>Once I arrived on scene, I buckered out, put my Structural Firefighting gear on and reported to Staging, once at Staging FF George Stegner assigned me as an EMS crew with FF/PM Corey Braunschweig. Shortly after we were requested per Incident Command to report to Apartment # 11, the site of the explosion. I went up the stairs first, FF/PM Braunschweig followed me up the stairs. Once we arrived upstairs in the apartment, the explosion site, I witnessed the FF City Crew sorting through ceiling installation in the kitchen area, by the stove, shortly after the entry crew stated that they had found a victim in the kitchen area in front of the stove. At that point someone asked me to go down stairs to get the AED/DEFIB. I ran down stairs to grab the AED and ran upstairs and gave the AED/DEFIB to FF/PM Braunschweig. Once FF Braunschweig got the AED/DEFIB, he connected the pads, and that moment, another firefighter had mentioned that the stove was on (Between med/High Temp) at that time Fire Chief Mannel came upstairs. The fire alarm was still sounding at the time and ^{Capt. Johnson} asked if someone could shut it off. Capt. Smith had also come upstairs and stated anyone that doesn't need to be here to go down stairs. FF/PM Braunschweig stated that we were getting a Flatline on the AED. I then informed Capt. Smith and Chief Mannel that the victim was 10-42. Chief Mannel then stated, let's leave everything in place and to</p>							

Pick up our equipment to head down stairs. ONCE down stairs
Chief Mannel stated to pack everything up. And we started
cleaning up and putting the BDFD Equipment and Apparatus
Back in Service. and then left the scene and went back to
the BDFD station to help clean up

Signature of Person Completing This Form



Date:

3-5-2018

Time: 3:23 PM

BEAVER DAM FIRE DEPARTMENT

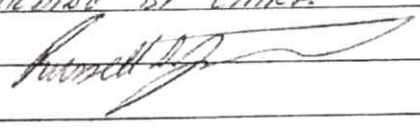
Incident Report Form

FIRE/ARSON INVESTIGATION

Incident No.: 1803061
 Address of Incident: 109 KUMAR DR # 11 Date of Incident 3-5-18
 Name: RUSSELL JOHNSON Rank: CAPT Station: _____ Shift: 3
 Assignment: INTERIOR Home Phone No.: [REDACTED]

If you answer "Yes" to any of the questions listed below, provide details on the back side of this form. When describing locations, a sketch is most helpful. *Attach additional sheets if necessary*

		Exterior Observations	
	Yes	No	
A1		✓	Was smoke showing when you arrived?
A2		✓	Was fire showing when you arrived?
A3		✓	Did you see any suspicious persons/activity?
A4		✓	Did you see any persons or vehicles leaving the area as you arrived?
A5		✓	Did obstacles seem to be placed so as to slow building access, entry or system hook up?
A6		✓	Did you notice any footprints, containers, or other evidence outside of the building?
		Building Entry	
	Yes	No	
B1	✓		Were any exterior doors ajar or unlocked when you arrived?
B2	✓		Were any windows open or broken when you arrived?
B3		✓	Did you enter with a key? If "Yes", who provided the key for your use?
B4		✓	Did you use any forcible entry?
B5		✓	Did you see anyone else enter with a key or use forcible entry?
		Interior Information	
	Yes	No	
C1		✓	Did you smell any unusual odors?
C2		✓	Did obstacles seem to be placed in your way?
C3		✓	Did you observe unusual flame colors?
C4		✓	Did you notice any unusual smoke colors?
C5		✓	Did you see separate and unrelated fires?
C6		✓	Did you shut off circuit breakers or remove fuses?
C7		✓	Did you shut off the natural gas supply to the building or any appliance?
C8		✓	Did you unplug, shut off or move any appliances in the room of fire origin?
C9		✓	Did you move any items such as furniture in the room of fire origin?
C10		✓	Did you see anyone perform any of the operations described in C6-C9?

		Yes	No	Fire Alarm Information				
D1		<input checked="" type="checkbox"/>	<input type="checkbox"/>	Was the fire alarm sounding when you arrived?				
D2		<input type="checkbox"/>	<input checked="" type="checkbox"/>	Could you hear a smoke detector sounding (in the unit where the fire occurred)?				
D3		<input type="checkbox"/>	<input checked="" type="checkbox"/>	Did you silence the fire alarm system, or any smoke detectors?				
D4		<input type="checkbox"/>	<input checked="" type="checkbox"/>	Did you see anyone silence the fire alarm system, or any smoke detectors?				
A3	Gender:	Age:		Race:	Height:	Weight:	Glasses:	Facial hair:
	Build:	Hair Style:			Clothing (color/type):			
A4	Year:	Make:		Model:		Color:		
	License No.:	State:		Direction of Travel:				
B1	DOOR TO THE APARTMENT WAS BLOWN OFF THE HINGES, LYING ON THE GROUND 3-4 FEET FROM DOOR FRAME.							
B2	WINDOWS WERE BLOWN OUT BY EXPLOSION							
DISPATCHED FOR AN EXPLOSION, I WAS THE OFFICER ON THE FIRST ARRIVING ENGINE. NO SMOKE OR FLAMES WERE VISIBLE. I WAS TOLD THE FIRE WAS OUT BY D.C. CHRISTIAN. A 1 3/4 LINE WAS STRETCHED TO THE FRONT OF APT. #11 BUT NOT CHARGED								
ENTERED WEARING SCBA TO 2ND FLOOR APARTMENT. FIBER GLASS FLUFF INSULATION WAS ON THE STAIRS AND A COIL IN THE KITCHEN AREA OF THE APARTMENT. CEILING WAS BLOWN OFF THE KITCHEN CEILING RAFTERS WERE VISIBLE AND THE RAFTERS WERE BLOWN. CHECKED OTHER ROOMS FOR VICTIMS WHILE FF BROTHERY PUSHED INSULATION AND REMOVED PILES OF DRY WALL TILL VICTIM WAS FOUND. AIR QUALITY WAS CHECKED WITH 4 GAS METER. VICTIM WAS CHECKED BY EMS CREW WITH MONITOR. ORDERED OUT OF ^{THE} BUILDING BY CHIEF								
								

Signature of Person Completing This Form _____ Date: _____
Time: _____

BEAVER DAM FIRE DEPARTMENT

Incident Report Form

FIRE/ARSON INVESTIGATION

Incident No.: 1803001
 Address of Incident: 109 Knap Dr. #11 Date of Incident 3/5/2018
 Name: Corey Braunschweig Rank: FF/Medic Station: _____ Shift: 3
 Assignment: Driver-1271 Home Phone No.: [REDACTED]

If you answer "Yes" to any of the questions listed below, provide details on the back side of this form. When describing locations, a sketch is most helpful. *Attach additional sheets if necessary.*

		Exterior Observations	
	Yes	No	
A1		X	Was smoke showing when you arrived?
A2		X	Was fire showing when you arrived?
A3		X	Did you see any suspicious persons/activity?
A4		X	Did you see any persons or vehicles leaving the area as you arrived?
A5		X	Did obstacles seem to be placed so as to slow building access, entry or system hook up?
A6		X	Did you notice any footprints, containers, or other evidence outside of the building?
		Building Entry	
	Yes	No	
B1		X	Were any exterior doors ajar or unlocked when you arrived?
B2	X		Were any windows open or broken when you arrived?
B3		X	Did you enter with a key? If "Yes", who provided the key for your use?
B4		X	Did you use any forcible entry?
B5		X	Did you see anyone else enter with a key or use forcible entry?
		Interior Information	
	Yes	No	
C1		X	Did you smell any unusual odors?
C2		X	Did obstacles seem to be placed in your way?
C3		X	Did you observe unusual flame colors?
C4		X	Did you notice any unusual smoke colors?
C5		X	Did you see separate and unrelated fires?
C6		X	Did you shut off circuit breakers or remove fuses?
C7		X	Did you shut off the natural gas supply to the building or any appliance?
C8	X		Did you unplug, shut off or move any appliances in the room of fire origin?
C9		X	Did you move any items such as furniture in the room of fire origin?
C10		X	Did you see anyone perform any of the operations described in C6-C9?

Signature of Person Completing This Form  Date: 3/5/18
Time: 1456

Beaver Dam Fire department dispatched for an explosion at 109 Knaup Drive. Reports stated that the explosion had blown out doors and windows. 1271 went enroute and arrived at the apartment complex and positioned next to 1262 for possible aerial operations. Crews from 1262 and 1251 as well as some paid-on-call had already entered the apartment when 1271 arrived. Prior to setting up for aerial operations, command requested EMS personnel to enter into apartment and Firefighter Braunschweig was tasked with entering in with Firefighter Peck to evaluate a victim that was found in the apartment #11. Prior to entry, it was noted that the exterior door had been completely blown off the apartment as well as the apartment windows. Upon entry major damage was noted throughout the apartment with insulation covering everything in the kitchen area. The ceiling was exposed showing major damage as well. No fire was noted at our entry due to being extinguished earlier prior to 1271 arriving. Firefighter Braunschweig and Firefighter Jatczak came into apartment with cardiac monitor and shown where victim was. Victim was lying covered under insulation in the kitchen area next to the stove. Refrigerator door was open and blood splatter was noted in the refrigerator. Victim had sustained major injuries including lacerations around patients back, flanks and stomach. Patient was also missing his left arm below the forearm and the victims face was also burned. Monitor was applied and asystole was observed on the monitor. Police officers then entered and obtained photographs of victim. Once completed, I turned off the far left burner knob on the stove which had been set between "off" and "high". Firefighter Braunschweig then exited the apartment with the rest of the firefighter personnel and then cleared scene with 1271 and returned to quarters. End of report.

BEAVER DAM FIRE DEPARTMENT

Incident Report Form

FIRE/ARSON INVESTIGATION

Incident No.: 1803061
 Address of Incident: 109 Knaup Date of Incident: 3/5/18
 Name: John M Jaczak Rank: FF/Medic Station: 1 Shift: 5
 Assignment: Engineer/Medic Home Phone No.: [REDACTED]

If you answer "Yes" to any of the questions listed below, provide details on the back side of this form. When describing locations, a sketch is most helpful. *Attach additional sheets if necessary.*

		Exterior Observations	
	Yes	No	
A1		✓	Was smoke showing when you arrived?
A2		✓	Was fire showing when you arrived?
A3		✓	Did you see any suspicious persons/activity?
A4		✓	Did you see any persons or vehicles leaving the area as you arrived?
A5		✓	Did obstacles seem to be placed so as to slow building access, entry or system hook up?
A6		✓	Did you notice any footprints, containers, or other evidence outside of the building?
		Building Entry	
	Yes	No	
B1	✓		Were any exterior doors ajar or unlocked when you arrived?
B2	✓		Were any windows open or broken when you arrived?
B3		✓	Did you enter with a key? If "Yes", who provided the key for your use?
B4		✓	Did you use any forcible entry?
B5		✓	Did you see anyone else enter with a key or use forcible entry?
		Interior Information	
	Yes	No	
C1		✓	Did you smell any unusual odors?
C2		✓	Did obstacles seem to be placed in your way?
C3		✓	Did you observe unusual flame colors?
C4		✓	Did you notice any unusual smoke colors?
C5		✓	Did you see separate and unrelated fires?
C6		✓	Did you shut off circuit breakers or remove fuses?
C7		✓	Did you shut off the natural gas supply to the building or any appliance?
C8	✓		Did you unplug, shut off or move any appliances in the room of fire origin?
C9		✓	Did you move any items such as furniture in the room of fire origin?
C10	✓		Did you see anyone perform any of the operations described in C6-C9?

Signature of Person Completing This Form  Date: 3/5/18
Time: 1530

Responded as Engineer for 1262 with Captain Johnson and FF Theel. With arrival on scene multiple officers were already on location. Along with Deputy Chief Christian. DC Christian located the affected building along with a Hydrant across from 113 Knaup. He was parked on the D side and the Explosion occurred on the C side. I stopped the engine to dropped the LDH and drove around to the A side of the building. Engine was parked and LDH was connected to truck and cross lay was pulled by FF Guthery. I made contact with the officers and FF's on C side. Second story window was blown out and the C side second floor was blown outward as noticeable bowing was seen in the exterior wall. FF Danne was on located at the top of the stairs the residents indicating he could use a water can. Officer Strochota and Detective Johnson were also seen going up and down the stairs. Detective Johnson reported High Velocity blood spatter upstairs. Large amount of white blown in fiberglass insulation seen on the stairs along with a can of acetone on the stairs. On the C side of the building to the north debris from the widow and cladding was seen. No smoke, flames or odors were noted. FF Theel and Guthery Entered then building along with Captain Johnson. I returned to the engine on the A side to put it in pump gear. I also instructed other FF's to gear up and clear the rest of the building with a thermal camera. Interior crews then began to request EMS personnel and gear upstairs as they located a victim. FF/Medic Braunschweig and I went up stair with Cardiac monitor to assist. FF Peck and Captain Smith followed behind. Victim was seen lying on left lateral side in the kitchen. Abdominal evisceration was seen along with burns to face and left side of his body. FF/Medic Braunschweig applied 4 Lead and was found in Asystole in three leads. Stove was also seen on. Then furthest left knob was on with it set between high and off. FF/Medic Braunschweig turned off and confirmed others were turned off. While looking around the apartment a second microwave was seen and a mini fridge with medical gloves over beakers in it. After victim was determined DOA all fire personal removed themselves from then scene and turn it over to the BDPD. I had advised Chief Mannel that before police begin to investigate it would be in our best interest to get our fully calibrated four gas metered along with Dodge County Hazmat Photo Ionizing Detector, to make sure the environment is completely safe.

Upon entering the building to meter with four gas meter and PID they were zeroed outside the building. I entered with officer Strochota. Readings were taken at top of stairs. No positive readings were seen. Reading were taken near unknown chemical in mini fridge as it contain beakers with rubber gloves over them and an unknown substance inside. Reading were also taken in bedroom where as box of beakers and graduated cylinders were seen. Nothing was touched other than where we had walked. Antifreeze and unknown chemicals were scene in fridge as then door was slightly propped open. No positive readings were seen. A closet that was open at the top of the stairs had a box in it that had and ORM D placard on it. Once again I stop for readings and no positive readings were seen. I then exited the building indicating to then BDPD that I had no positive readings and oxygen remained at 20.9% during the entire time on both meters.

BEAVER DAM FIRE DEPARTMENT

Incident Report Form

FIRE/ARSON INVESTIGATION


Incident No.: 1803061
 Address of Incident: 109 Knaup Drive Apt #11 Date of Incident 03/05/18
 Name: Nicholas D. Guthery Rank: FF/Medic Station: 1 Shift: 3
 Assignment: Firefighter/Paramedic: Attack Team Home Phone No.: [REDACTED]

If you answer "Yes" to any of the questions listed below, provide details on the back side of this form. When describing locations, a sketch is most helpful. *Attach additional sheets if necessary.*

		Exterior Observations	
	Yes	No	
A1		X	Was smoke showing when you arrived?
A2		X	Was fire showing when you arrived?
A3		X	Did you see any suspicious persons/activity?
A4		X	Did you see any persons or vehicles leaving the area as you arrived?
A5		X	Did obstacles seem to be placed so as to slow building access, entry or system hook up?
A6		X	Did you notice any footprints, containers, or other evidence outside of the building?
		Building Entry	
	Yes	No	
B1		X	Were any exterior doors ajar or unlocked when you arrived?
B2	X		Were any windows open or broken when you arrived?
B3		X	Did you enter with a key? If "Yes", who provided the key for your use?
B4		X	Did you use any forcible entry?
B5		X	Did you see anyone else enter with a key or use forcible entry?
		Interior Information	
	Yes	No	
C1	X		Did you smell any unusual odors?
C2		X	Did obstacles seem to be placed in your way?
C3		X	Did you observe unusual flame colors?
C4		X	Did you notice any unusual smoke colors?
C5		X	Did you see separate and unrelated fires?
C6		X	Did you shut off circuit breakers or remove fuses?
C7		X	Did you shut off the natural gas supply to the building or any appliance?
C8		X	Did you unplug, shut off or move any appliances in the room of fire origin?
C9	X		Did you move any items such as furniture in the room of fire origin?
C10		X	Did you see anyone perform any of the operations described in C6-C9?

		Fire Alarm Information	
D1	Yes	No	Was the fire alarm sounding when you arrived?
D2	X		Could you hear a smoke detector sounding (in the unit where the fire occurred)?
D3	X		Did you silence the fire alarm system, or any smoke detectors?
D4		X	Did you see anyone silence the fire alarm system, or any smoke detectors?
A3	Gender:	Age:	Race:
	Build:	Hair Style:	
A4	Year:	Make:	Model:
	License No.:	State:	Direction of Travel:
<p>I responded with an ambulance (1251) emergent to the scene. On arrival I pulled past the building. I put on my airpack and grabbed an 1 3/4" Attack line off of 1262. FF Theel and myself went around to the backside with the 1 3/4" handline. I witnessed the door blown off the hinges, windows broken out on 2nd story and sliding glass door to balcony was blown out. FF Theel and myself made our way into the apartment. No smoker or fire was noted. The ceiling was collapsed at this time and kitchen was covered in insulation and blood. Police department was upstairs in the apartment on our arrival. Blood was noted by myself splattered on the fridge, that was partially open. FF/Medic Guthery started to remove the insulation that was covering the kitchen floor, where the victim was thought to be due to blood. Firefighter Guthery (myself) removed several cabinet doors and pieces of drywall before finding the victim. Victim was lying on his left lateral side. Burns were noted from mid thigh to the top of his head. Victim was missing his left arm due to explosion and a laceration was noted to his abdomen. At this time Paramedic Braunschweig and Paramedic Jatezak moved in to access for signs of life. Firefighter/Medic Guthery and Theel exited the building at this time. On the way out, I noticed 2 1/2 gallon cans at the base of the door, at the bottom of the stairs.</p>			

C1	- I smelled a strong chemical like odor. I cannot could not determine what the smell was.

Signature of Person Completing This Form  Date: 03/05/18
Time: 14:48

BEAVER DAM FIRE DEPARTMENT

Incident Report Form

FIRE/ARSON INVESTIGATION

Incident No.: 1803061
 Address of Incident: 209 Knaup Dr #11 Date of Incident 3/5/18
 Name: ERIC THEEL Rank: FF/IA Station: 1 Shift: 3
 Assignment: FIREFIGHTER / PARAMEDIC 1262 Home Phone No.: [REDACTED]

If you answer "Yes" to any of the questions listed below, provide details on the back side of this form. When describing locations, a sketch is most helpful. Attach additional sheets if necessary.

		Exterior Observations	
	Yes	No	
A1		X	Was smoke showing when you arrived?
A2		X	Was fire showing when you arrived?
A3		X	Did you see any suspicious persons/activity?
A4		X	Did you see any persons or vehicles leaving the area as you arrived?
A5		X	Did obstacles seem to be placed so as to slow building access, entry or system hook up?
A6		X	Did you notice any footprints, containers, or other evidence outside of the building?
		Building Entry	
	Yes	No	
B1	X		Were any exterior doors ajar or unlocked when you arrived?
B2	X		Were any windows open or broken when you arrived?
B3		X	Did you enter with a key? If "Yes", who provided the key for your use?
B4		X	Did you use any forcible entry?
B5		X	Did you see anyone else enter with a key or use forcible entry?
		Interior Information	
	Yes	No	
C1		X	Did you smell any unusual odors?
C2		X	Did obstacles seem to be placed in your way?
C3		X	Did you observe unusual flame colors?
C4		X	Did you notice any unusual smoke colors?
C5		X	Did you see separate and unrelated fires?
C6		X	Did you shut off circuit breakers or remove fuses?
C7		X	Did you shut off the natural gas supply to the building or any appliance?
C8		X	Did you unplug, shut off or move any appliances in the room of fire origin?
C9		X	Did you move any items such as furniture in the room of fire origin?
C10		X	Did you see anyone perform any of the operations described in C6-C9?

Fire Alarm Information

	Yes	No	
D1	X		Was the fire alarm sounding when you arrived?
D2		X	Could you hear a smoke detector sounding (in the unit where the fire occurred)?
D3		X	Did you silence the fire alarm system, or any smoke detectors?
D4		X	Did you see anyone silence the fire alarm system, or any smoke detectors?

A3	Gender:	Age:	Race:	Height:	Weight:	Glasses:	Facial hair:
	Build:	Hair Style:		Clothing (color/type):			Color:
A4	Year:	Make:	Model:	Direction of Travel:			
	License No.:	State:					

B1 Upon arrival the door to apartment was open and all windows + the patio door were blown out of the building.

D1 The alarm was sounding upon arrival in the apartment.

Additional - We moved debris to search for victim in the kitchen area. I continued through the apartment to check other areas for victims. The bedroom door was blown off. The bathroom door was jammed and had to be forced due to damage. No other victims found.

Signature of Person Completing This Form  Date: 3/5/18
Time: 1443

BEAVER DAM FIRE DEPARTMENT

Incident Report Form

FIRE/ARSON INVESTIGATION

Incident No.: 1803061
 Address of Incident: 109 Kraup Dr #11 Date of Incident: 3/5/18
 Name: MIKE DAARF Rank: _____ Station: _____ Shift: 3
 Assignment: _____ Home Phone No.: _____

If you answer "Yes" to any of the questions listed below, provide details on the back side of this form. When describing locations, a sketch is most helpful. Attach additional sheets if necessary.

		Yes	No	Exterior Observations
A1			X	Was smoke showing when you arrived?
A2	X	X		Was fire showing when you arrived? <u>Fire was showing in the stairwell</u>
A3			X	Did you see any suspicious persons/activity?
A4			X	Did you see any persons or vehicles leaving the area as you arrived?
A5			X	Did obstacles seem to be placed so as to slow building access, entry or system hook up?
A6			X	Did you notice any footprints, containers, or other evidence outside of the building?
		Yes	No	Building Entry
	X			Were any exterior doors ajar or unlocked when you arrived? <u>Front door blown out</u>
B2	X			Were any windows open or broken when you arrived? <u>upper window blown out</u>
B3			X	Did you enter with a key? If "Yes", who provided the key for your use?
B4			X	Did you use any forcible entry?
B5			X	Did you see anyone else enter with a key or use forcible entry?
		Yes	No	Interior Information
C1			X	Did you smell any unusual odors?
C2			X	Did obstacles seem to be placed in your way?
C3			X	Did you observe unusual flame colors?
C4			X	Did you notice any unusual smoke colors?
C5			X	Did you see separate and unrelated fires?
C6			X	Did you shut off circuit breakers or remove fuses?
C7			X	Did you shut off the natural gas supply to the building or any appliance?
C8	X			Did you unplug, shut off or move any appliances in the room of fire origin?
C9	X			Did you move any items such as furniture in the room of fire origin?
C10			X	Did you see anyone perform any of the operations described in C6-C9?

		Yes	No	Fire Alarm Information				
I			X	Was the fire alarm sounding when you arrived?				
D2			X	Could you hear a smoke detector sounding (in the unit where the fire occurred)?				
D3			X	Did you silence the fire alarm system, or any smoke detectors?				
D4			X	Did you see anyone silence the fire alarm system, or any smoke detectors?				
A3	Gender:	Age:		Race:	Height:	Weight:	Glasses:	Facial hair:
	Build:	Hair Style:			Clothing (color/type):			
A4	Year:	Make:		Model:		Color:		
	License No.:	State:		Direction of Travel:				
<p>I arrived on scene saw front door blown out saw small fire on the stairwell grabbed a fire extinguisher from the deputy Chiefs car put the fire out with the extinguisher. I then went to the top of the stairs noticed insulation & dry wall on the floor shouted a few times fire department none responded. I then looked to my left noticed a light shining from underneath some plastic I then noticed blood splatter on the fridge called for police officer we started moving insulation found the microwave on the floor & moved it to the living room. I was then to left the building when other firefighters arrived upstairs.</p>								

Signature of Person Completing This Form Michael S. Dove Date: 3-5-18
Time: 2:42

WG MANAGEMENT

SECURITY DEPOSIT / RENT

Village Glen & Quail Run

115 Knaup Dr. #1
Beaver Dam WI. 53916
Office 920-210-9883
Fax 1-920-219-9880

VILLAGE GLEN / QUAIL RUN

RENTAL ADDRESS: 109 KNAUP DR. #11 Beaver Dam WI 53916

UPPER / LOWER

BEDROOMS 1 2 3

TENANT NAME: **BENJAMIN MORROW**

TENANT NAME:

SECURITY DEPOSIT: \$595. - 25. = 570. PD ON 9-27-17 CHECK # 1198

PET SECURITY:

PET RENT:

GARAGE: INCLUDED

RENT: \$595.

**SIGNED LEASE 11-23-17 = 8 DAYS IN THE MONTH OFF NOV.
PRO-RATED 8 DAYS = 159.00 PAID 11-23-17 CHECK 1208**

Emergency Contact
In Case of Emergency _____
Address, City, State, Zip _____
Bank Name: _____
Branch: _____
Account Type: _____
Routing Number: _____
Account Number: _____
Other: _____
NO PETS ALLOWED
(If student, please fill out the
School: _____
I received from Lessor the EPA
bill before 1979).



8850 N. Port Washington Rd, Suite 210 Bayside, Wisconsin 53217
T: (414) 964-0500 F: (414) 964-7217

For office use only	
S.D. S	_____
Rec'd	_____
Cash	_____ M.O. _____ Check _____
Notes	_____
Application Accepted Y/N _____	

Old RM

NON-REFUNDABLE APPLICATION FEE:
\$50.00 (\$25.00 shall be applied to security deposit if applicant is accepted and takes occupancy)

APPLICATION FOR TENANCY

Date of Application 9-21-17 Property Address 109 Apt. # 11
 Lease term 1yr Date rent commences NOV. 15 Rent \$ 595 Security Deposit \$ 595
 Tenant pays for: Heat _____ Gas _____ Electric X Municipal Services X Parking Street/Lot/Garage @ \$ _____
 Name Benjamin D Morrow Date of Birth 03/11/89 S.S.# _____ No. of children 0
 Present Address _____ City Madison State/zip WI 53717
 Time there 3 years Tele. # (608) 632-7474 Cell # (920) 558-7893 E-Mail benm1647@gmail.com
 Present Landlord Greenbriar Village Landlord's Tele. # (608) 833-7474
 Previous Landlord NA Previous Landlord's Tele. # NA
 Previous Address NA Time there N/A
 Present Employer Richelieu Foods Address 121 Industrial Dr City/State/zip Beaver Dam, WI 53916
 Employer's Tele. # (920) 887-1794 Years there 3 months Position QA technician Monthly Income \$2400
 Supervisor's Name D W Tele. # (920) 887-1794
 Previous Employer PPD Address 855 Research Way Suite 110 Middle WI 53562
 Previous Employer's Tele. # (608) 827-9400 Years there 2 Position Scientist

Credit References: Credit Card: Discover
 Person to Contact In Case of Emergency D M Relationship Father Tele. # _____
 Address, City, State, Zip _____ Black Creek, WI 54106
 Bank References: Checking BMO Harris Savings BMO Harris
 Make of Auto Ford focus Year 2013 License Plate # _____ Color Black

If accepted, I hereby agree to enter into a lease as agreed or at least to rent the apartment on a month to month basis with a sixty-day notice to terminate Tenancy. If I refuse to accept the apartment after this application is accepted, my deposit may be used to pay Lessor's damages. I have been shown a copy of the lease and Non Standard Rental Provisions sheet to be used and authorize current and future checking of my credit, employment and all references including providing said information to utility companies and other creditors.
 The Lessor shall be allowed sufficient time to check credit references before returning the earnest money deposit, but in no case more than 21-calendar days after acceptance of the earnest money.
 I have 7 days after occupancy to inspect the dwelling unit and notify the Lessor of any preexisting damages or defects and may request in writing a list of physical damage or defects, if any, charged to the previous tenant's security deposit.
 If this application is for a sublet tenancy, i.e., replacing a current tenant, I agree to assume any unsatisfied security deposit liabilities, which have occurred since the invention of the original lease.
 * When Municipal Services, which includes, but not limited to water and sewer, are not individually metered, the building's bill shall be prorated by the number of units in the building. Municipal Service charges shall be considered as rent.

Notice: You may obtain information about the sex offender registry and person registered with the registry by contacting the Wisconsin Department of Corrections at its Internet at www.wisconsin.gov or by phone at 877-234-0085.
 How did you learn about these apartments? Newspaper _____ Driving Past _____ Tenant _____ UWM _____ Internet _____
 Other: coworker
NO PETS ALLOWED

(If student, please fill out the following)	Date	Manufacturer
<u>Benjamin D Morrow</u> (Tenant)	<u>09/22/17</u>	<u>LANDLORD SVC</u>
School: _____ Year _____ Major _____ Source of funding _____	<u>02/02/16</u>	<u>CHASE MTG</u>

I received from Lessor the EPA Information "Protect Your Family Form Lead in Your Home at the time of application (only for buildings built before 1978).
 X _____ Date: _____
 (Tenant) White - Owner Yellow - Manager Pink - Tenant



8860 N. Port Washington Rd., Suite 210 • Bayside, Wisconsin 53217 • p: 414.964.0500 • f:414.964.7217 • www.wgmanagement.com

Fax Transmission Cover Sheet

Date: 9-22-17

To: Jennie/Nancy

From: Lynn - Village Glen & Quail Run Apartments
Beaver Dam

Message: 1- Application Benjamin Morrow
I find B on Wap.
Hasn't been at his job very long
wants out of Madison-
Very Nice Guy-

of pages (including cover sheet) 2

Thank You
Village Glen & Quail Run Apartments
Beaver Dam W.I. 53916
Office: 820-210-9883
Fax: 820-219-9880

Copy 1 of 1
NO LIVE MATCHES TO
INSIDE or OUTSIDE
IN WISCONSIN
LESS
WGA
8860 N. Port Washington Rd., Bayside, WI 53217
(414) 964-0500 Fax: (414) 964-7217

VILLAGE GLEN & QUAIL RUN
Beaver Dam, WI

EVERGREEN VILLAGE
Fond du Lac, WI

HERITAGE HOUSE
Jefferson, WI

MILWAUKEE'S EAST SIDE
Oakland Ave, Milwaukee, WI

LAKEVIEW TERRACE
Two Rivers, WI



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Move In Date	Lease Term	Monthly Rent Total Payment	Total of all Deposits/Charged
11/23/17	From 3 PM to 11 AM on 12/1/17 to 11/30/18	\$595.00 if received by the 1 st day of the month, if received after that day, the rent due shall increase by \$50.00 for that month. This amount includes additional <input type="checkbox"/> Pet or <input type="checkbox"/> Parking	Unit Address: 119 Knapp Dr #11 Security Deposit: \$950 Includes Additional Deposit <input type="checkbox"/> Pet <input type="checkbox"/> Parking Pd by on <u>Tenant</u>

*****All parking fees if applicable as of lease printed date are included in total monthly rent above. 1 Outdoor Spaces Included 1 Garage Spaces Included Parking Agreement for extra leased spaces is a separate form and is required. If parking or pets are added after the original printing of this lease, the total monthly rent and security deposit listed above will not be all inclusive.

RESIDENTIAL LEASE

Parties Premises Term Rent It is mutually agreed by and between WG Management Lessor, and Benjamin Morrow Lessee(s), jointly and severally, that Lessor does hereby lease to Lessee the following described premises in the State of Wisconsin 109 Knapp Dr #11 Bayside WI the term and rent described above. First month's rent is due and payable on the first day of Dec 2017 and the entire monthly rent shall be paid on or before the first day of each month thereafter. If this is a month-to-month lease or if by operation of the terms hereof a month-to-month tenancy is created hereunder, Lessee agrees not to vacate the premises during the months of November, December, January and February; if Lessee vacates in violation hereof, Lessee shall pay for any rent loss, costs of re-renting and utility costs during those months or for the balance of the Lease, whichever is longer.

Residents There shall be no more than 1 adults and 0 children living in the premises during Lessee's tenancy. \$ 200.00 / month additional rent per extra unauthorized person (excluding children) or per animal without written approval of Lessor

Place of Payment Payments hereunder are to be made at 8850 N Port Washington Rd, Bayside, WI 53217. Lessor's business address, or such other place as Lessor shall designate in writing. All notices and papers for Lessor shall be sent to the same address.

Heat & Utilities Lessee/Lessor is to furnish heat at his/her expense. If Lessee is responsible for furnishing heat, Lessee agrees to maintain a reasonable amount of heat in cold weather to prevent damage to water pipes, etc. Should any damage occur because of Lessee's failure hereunder, Lessee shall be held responsible for damage. Lessees are responsible for their own gas and electric bills; Lessee/Lessor shall pay municipal, sewer, water, and service charges which may be separately metered, if not, they shall be prorated by the number of units in the building. Municipal charges shall be considered as rent.

Renewal And Shortened Term The renewal of the ORIGINAL TERM of this lease is not automatic, and tenancy beyond the original term shall be on a month-to-month basis under the provisions and conditions of this lease. UNDER ANY CIRCUMSTANCES, Lessee must give and Lessor must receive a SIGNED, WRITTEN notice of termination of tenancy AT LEAST 60 DAYS prior to the last day of the month that is Lessee's final month of tenancy or this lease shall continue as a month-to-month tenancy with a 60 day notice to terminate required. The day of delivery of notice to Lessor shall be counted as part of the notice period. WRITTEN notice must be SIGNED. E-mail does not constitute legal notice. int. BDM

Security Deposit Lessee agrees that the security deposit in the amount set forth above shall be held by Lessor and may be commingled with Lessor's operating funds; Lessee waives interest on security deposit and on any pre-paid rent. THE SECURITY DEPOSIT IS NOT RENT and Lessee may not use it as rent, but is a deposit which will be returned to Lessee after he/she surrenders the premises and returns all keys to Lessor; premises must be left in clean condition and ready for the next occupant. By "clean condition and ready for the next occupant" is meant clean and the better of: (1) the condition of the premises when turned over to Lessee, or (2) the condition of the premises following the completion of any work performed by either party to improve the premises (normal wear and tear excepted). Lessee agrees to the assignment of security deposit to new Owner in the event of the sale of the property. All sums due under the lease may be set off against security deposit.

Lessee has Examined Premises Lessee has examined and knows the condition of the premises and has received the same in good order and repair except as otherwise noted and endorsed by both parties on the reverse hereof and no representations as to the condition or state of repair have been made by Lessor except as noted and endorsed by both parties on the reverse hereof. Lessee shall have seven (7) days after the beginning of occupancy to inspect the premises and advise Lessor of any other damages which existed prior to his occupancy. Lessee may request in writing a list of physical damages or defects charged to the previous tenant's security deposit.

Lessee's Property Lessee's Duties Lessee is responsible for insuring his personal property. Lessee agrees to assume the following duties: (1) to notify Lessor (not a tradesman working for Lessor) of needed repairs and to do so in writing, except for emergencies; (2) To allow lessor / service personnel to enter premises at reasonable time or reasonable times upon reasonable notice to inspect, repair, improve, show, or comply with applicable laws or regulations. Lessor may enter without notice at reasonable times upon consent or request of Lessee including a request of Lessee for maintenance services or when a health, safety or repair emergency exists; (3) To use the premises only for lawful residential purposes; (4) To obey all lawful orders, rules and regulations of all government authorities; (5) To leave all alterations or improvements to the premises for Lessor's benefit; (6) Not to assign this lease or sublet premises without prior written consent of Lessor; (7) To obey and abide by the Rules and Regulations printed on the reverse side hereof and the Non Standard Rental Provisions which are part of this lease as though fully set forth herein; (8) Failure to immediately inform Lessor of situations or conditions causing damage to premises may result in Lessee being responsible for that damage. (9) Professionally shampoo, sanitize & deodorize the carpet after vacating the premises using one of the truck mounted firms in your area Lessor recommends.

Termination After Lessee leaves the premises, he shall be liable for the premises as though still in possession for all damages thereto until he has delivered all the keys to Lessor. The burden of proof of delivery of such keys is on Lessee. If the Lessee removes from the premises and leaves personal property, Lessor may presume, in the absence of a written agreement between the Lessor and the Lessee to the contrary, that the tenant has abandoned the personal property and may dispose of the abandoned personal property in any manner that the Lessor, in his sole discretion, determines is appropriate, except for medical items which shall be treated in accordance with §704.05(5) (em). Personal property left abandoned and

Breach of Lease In the event Lessee violates any of the terms of this lease, Lessor may serve the statutory 5 or 14 day notices as though Lessee's tenancy was a tenancy for the year at that time. In the event Lessee is evicted for failure to abide by the terms of this lease, or otherwise leaves the subject premises prior to the expiration of this lease, Lessee shall remain liable for all rental loss through the end of this lease as well as advertising, utility, city services, and all rental costs and fees unless Lessee is expressly released from such obligation by Lessor IN WRITING. Lessor shall make reasonable efforts to re-rent the unit per Wis. Statutes.

Waiver In the event either party defaults on any requirement of this lease and the other party fails to act on account of that default, the failure to act (waiver) shall relate only to the specific act of default. One or more such failures to act (waivers) by either party shall not constitute an amendment of this lease or an indication that later defaults shall result in a similar failure to act (waiver).

Rules/Pets Application See other side for Rules and Regulations. NO PETS ALLOWED OR VISITING PETS or See attached Pet Agreement (THIS IS REQUIRED IF PET IS PERMITTED) If Lessee makes representations to Lessor on a rental application or otherwise which induce Lessor to enter into this lease and Lessor thereafter discovers one or more material falsehoods in said representations, Lessor may cancel and rescind this lease upon written notice as though this was a month-to-month tenancy.

Terms The terms "Lessor" and "Lessee" as used herein shall be taken to mean singular or plural, masculine or feminine, as the case may be, and the provisions hereof shall bind all parties, their heirs, successors and assigns.

Tax In the event that sales tax is enacted on rentals, that tax shall be in addition to the rental amount specified shall be part of rent. Starting the January following execution hereof, the rental amount may be adjusted by Lessor to reflect property tax changes on a prorata basis and among the units of the building

Subordination Lessee acknowledges and agrees this lease is subordinate to any present or future mortgage on these premises.

Copy Special Lessee acknowledges that he has read and understands both sides of this document and that he has received a copy of it. No live Christmas trees Benjamin Morrow 920-858-7843 INSIDE or OUTSIDE Ford Focus 2013 Black

IN WITNESS WHEREOF, the parties have hereunto set their hands and seals as of the lease date written above. LESSOR: WG Management, Bayside LESSEE(s): Benjamin B. Morrow (SEAL) 11/23/17 date 8850 N Port Washington Rd, Bayside, WI 53217 (414) 961-0500 Fax: (414) 964-7217 Lessee X: _____ (SEAL) _____ date Lessee Y: _____ (SEAL) _____ date

GUARANTOR(S) OF LESSEE Lessee n/a In consideration of Lessor's agreement to this lease, the undersigned guarantor(s) the payment of all amounts due under the lease and the performance of the covenants by Lessee. X _____ (SEAL) X _____ (SEAL) X _____ (SEAL) Guarantor Guarantor Guarantor



Benjamin Morrow
109 Kraup dr. #11
Beaver Dam wI.

8850 N. Port Washington Rd., Suite 210 • Bayside, Wisconsin 53217 • p: 414.964.0500 • f:414.964.7217 • www.wgmanagement.com

NONSTANDARD RENTAL PROVISIONS

As part of the rental agreement (composed of the Rental Application, the Residential Lease with the Rules and Regulations and such other supplementary documents as the parties executed) the undersigned tenant(s) agree to the following charges and costs which may be assessed against the Lessee & Lessee's security deposit:

Please Initial

- BDM 1. The amount of rent due shall increase by \$50.00 for that month if full rent is not RECEIVED on or before the 1st day of the month.
- BDM 2. \$200 per month additional rent per unauthorized extra person(excluding children) or animal not authorized in writing by Lessor.
- BDM 3. \$50 fee for each non-sufficient funds or stopped payment check dishonored by tenant's bank. (Plus additional rent if applicable)
- BDM 4. \$50 per lock if all keys including mail key are not delivered to Lessor upon Lessee's vacating.
- BDM 5. \$75 for each garage door opener not delivered to Lessor upon Lessee's vacating.
- BDM 6. 50% of one month's rent in the event Lessee departs and either party re-rents the premises prior to the agreed lease end date (or any extension thereof) in addition, but not limited to advertising, signage, Lessor's actual costs, damages and rental commissions
- BDM 7. \$25 if Lessor or manager unlocks Lessee's unit because of lost, misplaced or forgotten keys.
- BDM 8. \$30 for cleaning each of Lessor's appliances left dirty by Lessee.
- BDM 9. \$35 per room for carpet cleaning beyond normal wear and tear if Lessee has failed to have stained and/or soiled carpets professionally cleaned upon vacating by a firm approved by Lessor, normally with truck mounted carpet cleaning unit. If Lessee had a pet in the unit, the carpets must be professionally cleaned and sanitized/deodorized.
- BDM 10. \$10 per hour for cleaning of vacated premises beyond one hour and repair of any damage for which the Lessee is responsible.
- BDM 11. \$15.00 per hour plus materials cost may be charged Lessee for repairs beyond normal wear and tear to repair and/or repaint marked, improperly painted or damaged surfaces in apartment if Lessee resided in unit less than a full 13 months, one half of the labor and materials cost if tenant resided in unit more than 13 months but less than a full 25 months.
- BDM 12. Tenant is responsible for glass breakage per Wis. Statute 704.07 (3b)
- BDM 13. Lost rent resulting from: 1) Lessee's pet's aggression, damage or odor is such that the premises are not re-rented without rental loss despite Lessor's normal rental efforts, 2) Lessee refuses to allow entry of premises during normal showing hours after having been given reasonable advance notice, 3) Lessee maintains condition of apartment in a manner that is not sanitary and orderly.
- BDM 14. The request for maintenance work by tenant constitutes permission for management/maintenance personnel to enter premises at reasonable times to perform repairs.
- BDM 15. Personal property left abandoned on premises upon tenant vacating shall be charged actual and reasonable cost or value of removal storage.
- BDM 16. \$50.00 if Lessor or manager must meet with utility personnel to activate or deactivate Lessee's service.
- BDM 17. The above charges shall become rent. Lessee's payments shall be applied First to any outstanding balance and only then to current charges and obligations.

I understand that if I fail to properly clean/repair my apartment upon departure I will be charged the actual costs of repairs, materials, labor and cost up to the stated amounts listed above.

I understand that if this is a sub-tenancy, (i.e., replacing a current tenant,) sub-tenant agrees to assume any unsatisfied security deposit liabilities, which have accrued since the inception of the original lease.

I have received a copy of the "Premises Condition Checklist" as part of the lease along with the Lessor's certification that, to the best of Lessor's knowledge, the premises is in rentable condition, normal wear and tear excluded, with no "billable" damage. I am aware that I have 7 days after occupancy to notify Lessor in writing of any damage or needed repairs which existed prior to occupancy and may request in writing a list of physical damages or defects if any, charged to the previous tenant's security deposit.

Identified, discussed and negotiated on 11-23-2017 (Date)

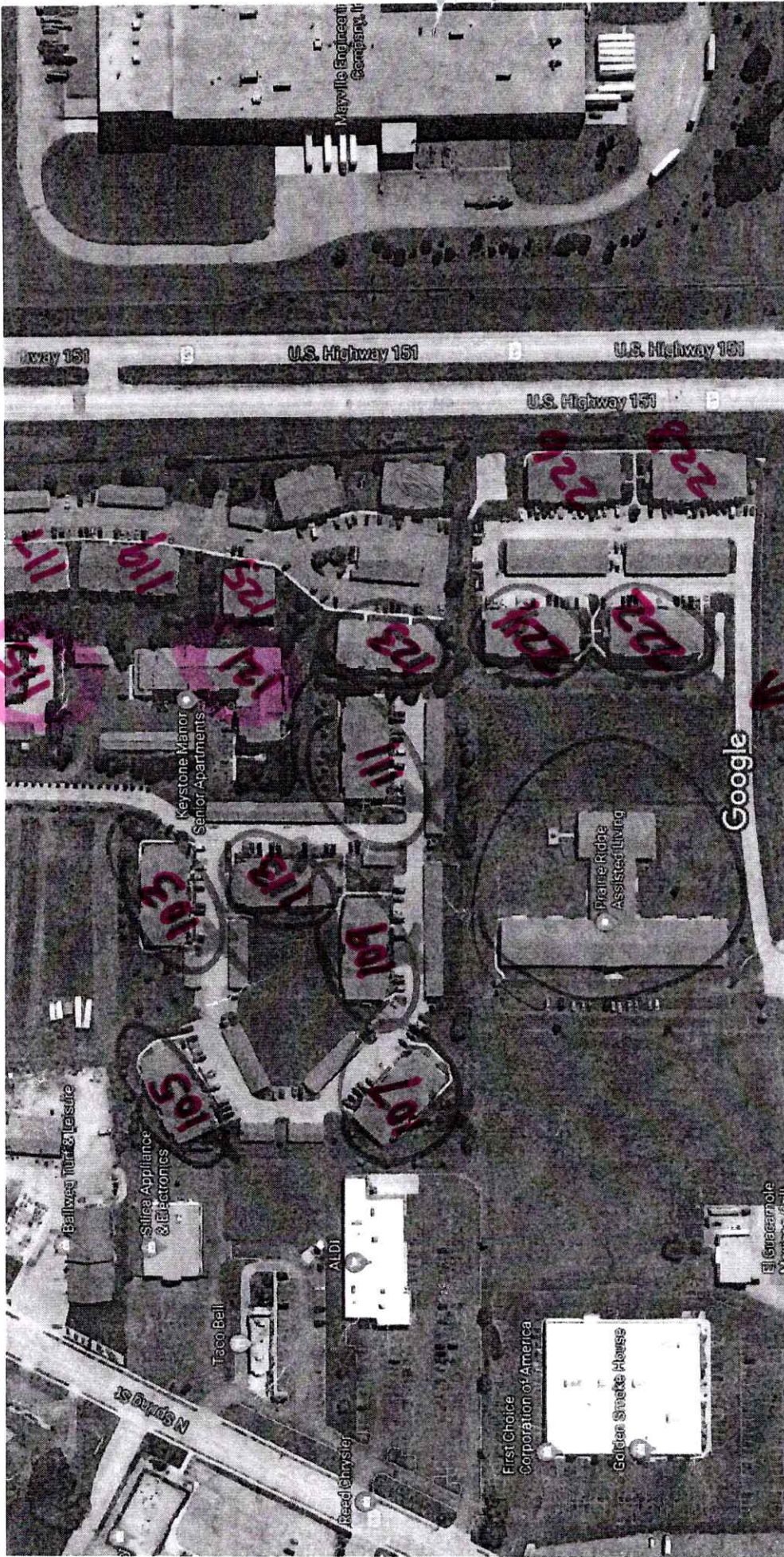
Lessee X Benjamin D. Morrow Lessee X _____
Lessee X _____ Lessee X _____

GUARANTOR(S):

Guarantor Date Guarantor Date



Google Maps Mills Fleet Farm



Imagery ©2018 Google, Map data ©2018 Google 100 ft

Industrial Dr. F



DODGE COUNTY SHERIFF'S OFFICE

Dale J Schmidt Sheriff Scott Mittelstadt Chief Deputy

FOR IMMEDIATE RELEASE

Date: March 5, 2018

Sheriff Dale J Schmidt

Office: 920-386-4115

dschmidt@co.dodge.wi.us

The Dodge County Sheriff's Office is assisting the Beaver Dam Police Department with an incident that occurred at 109 Knaup Drive within the City of Beaver Dam. This address is within an apartment complex on the North side of Beaver Dam. At about 12:56 pm Dodge County Central Communications received a 911 call of an explosion that took place at the above listed address. It is confirmed that one person has died as a result of the incident. The incident itself is still under investigation at this time and no further information on the incident itself will be available until Tuesday, March 6, 2018.

The investigation has led law enforcement to believe that there still may be materials present that are requiring the evacuation of several apartment buildings in the vicinity of the original incident. As a result, for the safety of residents in the area, we are ordering the evacuation of apartment buildings in the immediate vicinity. Those addresses include:

103, 105, 107, 109, 111, 113, and 123 Knaup Drive

212, 222, and 224 E Industrial Drive

Those who live in those residences can report to the Watermark at 209 S Center Street until permanent shelter arrangements can be made.

We are asking everyone to please avoid the area until further notice.

A Press Conference will be held at the Beaver Dam Police Department at 7:30pm. Further information will be released after that point as it becomes available.

Questions may be directed to Police Chief John Kreuziger at the Press Conference.

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DODGE COUNTY SHERIFF'S OFFICE

Dale J Schmidt Sheriff Scott Mittelstadt Chief Deputy

FOR IMMEDIATE RELEASE

Date: March 5, 2018

Sheriff Dale J Schmidt

Office: 920-386-4115

dschmidt@co.dodge.wi.us

UPDATE ON BELOW PRESS RELEASE

After further investigation, it has been deemed safe for occupants of the following apartment complexes to return to their apartments:

115, 117, 119, 123, 125, 127 and 129 Knaup Drive

222, 224, 226 and 228 East Industrial Drive

The Beaver Dam Police Department and Dodge County Sheriff's Office is maintaining the evacuation order in place for all other residences that have already been evacuated. If you are not listed in the above address, please do not try to return to your home as you will not be allowed entry.

No further information will be released on this incident until 10:30am at a press conference held at the Beaver Dam Police Department.

Original Press Release

The Dodge County Sheriff's Office is assisting the Beaver Dam Police Department with an incident that occurred at 109 Knaup Drive within the City of Beaver Dam. This address is within an apartment complex on the north side of Beaver Dam. At about 12:56 pm Dodge County Central Communications received a 911 call of an explosion that took place at the above listed address. It is confirmed that one person has died as a result of the incident. The incident itself is still under investigation at this time and no further information on the incident itself will be available until Tuesday, March 6, 2018.

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DODGE COUNTY SHERIFF'S OFFICE

Dale J Schmidt Sheriff **Scott Mittelstadt** Chief Deputy

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