





Jill Sweetapple <sweetapple@dekalbhistory.org>

Fwd: FW: Fork Creek Mountain Park - Destroyed Structure

1 message

Leslie Borger <borger@dekalbhistory.org>

Tue, Nov 27, 2012 at 3:11 PM

To: Jill Sweetapple <sweetapple@dekalbhistory.org>

maybe we should put this in the subject file?

----- Forwarded message -----

From: **Gannon, Kathie** <kgannon@dekalbcountyga.gov>

Date: Tue, Nov 27, 2012 at 3:04 PM

Subject: FW: Fork Creek Mountain Park - Destroyed Structure

To: Leslie Borger <borger@dekalbhistory.org>

After quite a few emails this came back. Thanks for alerting us. I don't think anyone over here knew about the fire. Sorry I didn't forward this to you sooner.

Hope you had a great Thanksgiving!

Michelle Walldorff

Constituent Services Coordinator

Office of Commissioner Kathie Gannon

Super District 6

Manuel J Maloof Center 1300 Commerce Drive Decatur, GA 30030

PH: 404.371.4909 FAX: 404.371.7004

www.kathiegannon.com



From: Nagarkar, Vineet S.

Sent: Wednesday, November 21, 2012 12:22 PM

To: Gannon, Kathie; Billups, Marvin F.; Sims, Robert K.; Fox, Davis

Cc: Wilson, Roy; Karikaran, Hari; Jacobs, Larry C.; Rhinehart, William E. (Ted); Jaugstetter, John; Wu,

David W.

Subject: Fork Creek Mountain Park - Destroyed Structure

All,

In a follow up to the emails/inquires below regarding the structure that was destroyed in a fire at Fork Creek Mountain Park, I was able to research the matter yesterday afternoon. Visiting the site, it was a sad to see that the structure that we were going to retain, "Red Barn", had been totally destroyed by fire. Attached is the report from Fire Rescue Services that was forwarded to me today. The report indicates that the incident took place on October 7, 2012 around 6PM. Also, attached are some pictures of the site taken yesterday. Unfortunately there is nothing remaining that can be salvaged.

Please note that the hazmat study is in process for remaining structures onsite. If areas containing asbestos, lead paint, etc. are found, they will need to be abated before the demolition can take place.

Best Regards,

Vineet S. Nagarkar

Project Manager

DeKalb County Government

Infrastructure Group

Engineering Services

Project Management Office

Clark Harrison Building

*330 West Ponce de Leon Avenue, 4th Floor,
Decatur, Georgia 30030-3221*

404-687-3709

vsagarkar@dekalbcountyga.gov

From: Walldorff, Michelle M. **On Behalf Of** Gannon, Kathie
Sent: Wednesday, November 21, 2012 9:55 AM
To: Nagarkar, Vineet S.
Subject: RE: Fork Creek Mountain Park Project

Hi Vineet,

Did you get any information on the burned structure at Fork Creek?

Thanks,

Michelle Walldorff

Constituent Services Coordinator

Office of Commissioner Kathie Gannon

Super District 6

Manuel J Maloof Center 1300 Commerce Drive Decatur, GA 30030

PH: 404.371.4909 FAX: 404.371.7004

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From: Nagarkar, Vineet S.
Sent: Tuesday, November 20, 2012 11:01 AM
To: Gannon, Kathie; Billups, Marvin F.
Subject: RE: Fork Creek Mountain Park Project

I have not been made aware of any structures that have burned down at the site. I have a meeting with Matrix this afternoon on site as they are performing a Hazmat study for the various structures on the property besides the "Red Barn". I will verify if there has been any such incident on the property and let you all know.

Best Regards,

Vineet S. Nagarkar

Project Manager

DeKalb County Government

Infrastructure Group

Engineering Services

Project Management Office

Clark Harrison Building

*330 West Ponce de Leon Avenue, 4th Floor,
Decatur, Georgia 30030-3221*

404-687-3709

vsnagarkar@dekalbcountyga.gov

From: Walldorff, Michelle M. **On Behalf Of** Gannon, Kathie
Sent: Tuesday, November 20, 2012 10:36 AM
To: Billups, Marvin F.; Nagarkar, Vineet S.
Subject: FW: Fork Creek Mountain Park Project

Leslie, from the DeKalb History Center, was told by the former owner that one of the structures burned at Fork Creek. Do you have any details?

Thanks and have a terrific Thanksgiving!

Michelle Walldorff

Constituent Services Coordinator

Office of Commissioner Kathie Gannon

Super District 6

Manuel J Maloof Center 1300 Commerce Drive Decatur, GA 30030

PH: 404.371.4909 FAX: 404.371.7004

www.kathiegannon.com



From: Jaugstetter, John
Sent: Tuesday, November 20, 2012 8:31 AM
To: Gannon, Kathie
Cc: Nagarkar, Vineet S.; Billups, Marvin F.
Subject: RE: Fork Creek Mountain Park Project

Michelle,

Vineet Nagarkar or Marvin Billups should be able to provide additional info.

We are managing the HUD grant, but I do not have any details regarding burned structures.

Thanks!

John Jaugstetter, LEED AP

Senior Planner

Community Development Department

DeKalb County Government

150 East Ponce de Leon Avenue, Suite 330 Decatur, GA 30030

404-286-3316 direct

404-286-3337 fax

jjaugstetter@dekalbcountyga.gov

From: Walldorff, Michelle M. **On Behalf Of** Gannon, Kathie
Sent: Monday, November 19, 2012 10:30 AM
To: Jaugstetter, John
Subject: RE: Fork Creek Mountain Park Project

John,

Leslie, from the DeKalb History Center, was told by the former owner that one of the structures burned at

Fork Creek. Do you have any details? Or know anyone who would?

Thanks,

Michelle Walldorff

Constituent Services Coordinator

Office of Commissioner Kathie Gannon

Super District 6

Manuel J Maloof Center 1300 Commerce Drive Decatur, GA 30030

PH: 404.371.4909 FAX: 404.371.7004

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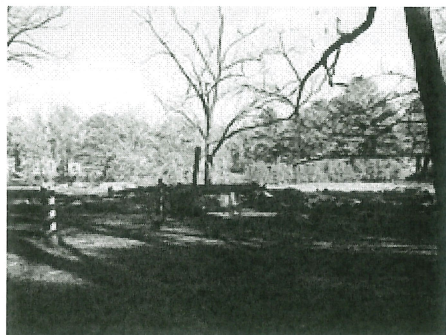


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Leslie Borger
DeKalb History Center
404-373-1088 Ext. 20

Please note my email addresses is changing to borger@dekalbhistory.org. Please make this change in your address book so that I continue to receive your emails!

5 attachments



100_9907.JPG
227K



100_9909.JPG
238K



100_9911.JPG
273K



100_9922.JPG
308K

 **DOC111912-11192012125856.pdf**
117K

A	MM DD YYYY <input type="text" value="04405"/> <input type="text" value="GA"/> <input type="text" value="10"/> <input type="text" value="07"/> <input type="text" value="2012"/>	Station <input type="text" value="20"/>	Incident Number * <input type="text" value="12-0074817"/>	Exposure * <input type="text" value="000"/>	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> No Activity	NFIRS -1 Basic
B Location*	<input type="checkbox"/> Check this box to Indicate that the address for this incident is provided on the Wildland Fire Census Tract <input type="text" value="0234"/> - <input type="text" value="05"/> Module In Section B "Alternative Location Specification". Use only for Wildland fires.					
<input checked="" type="checkbox"/> Street address <input type="checkbox"/> Intersection <input type="checkbox"/> In front of <input type="checkbox"/> Rear of <input type="checkbox"/> Adjacent to <input type="checkbox"/> Directions	<input type="text" value="2892"/> <input type="text" value="RIVER"/> <input type="text" value="RD"/> Number/Milepost Prefix Street or Highway Street Type Suffix	<input type="text" value="Stone Mountain"/> <input type="text" value="GA"/> <input type="text" value="30083"/> Apt./Suite/Room City State Zip Code	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Cross street or directions, as applicable			
C Incident Type *	<input type="text" value="111"/> Building fire		E1 Date & Times		E2 Shift & Alarms	
D Aid Given or Received*	<input type="checkbox"/> Mutual aid received <input type="checkbox"/> Automatic aid recv. <input type="checkbox"/> Mutual aid given <input type="checkbox"/> Automatic aid given <input type="checkbox"/> Other aid given <input checked="" type="checkbox"/> None		Check boxes if dates are the same as Alarm Date. ALARM always required Alarm * <input type="text" value="10"/> <input type="text" value="07"/> <input type="text" value="2012"/> <input type="text" value="18:02:00"/> ARRIVAL required, unless canceled or did not arrive <input checked="" type="checkbox"/> Arrival * <input type="text" value="10"/> <input type="text" value="07"/> <input type="text" value="2012"/> <input type="text" value="18:07:00"/> CONTROLLED Optional, Except for wildland fires <input checked="" type="checkbox"/> Controlled <input type="text" value="10"/> <input type="text" value="07"/> <input type="text" value="2012"/> <input type="text" value="18:10:00"/> LAST UNIT CLEARED, required except for wildland fires <input checked="" type="checkbox"/> Last Unit Cleared <input type="text" value="10"/> <input type="text" value="07"/> <input type="text" value="2012"/> <input type="text" value="20:21:00"/>		Local Option <input type="text" value="B"/> <input type="text" value="01"/> <input type="text" value="15"/> Shift or Alarms District Platoon E3 Special Studies Local Option <input type="text" value=""/> <input type="text" value=""/> Special Study ID# Special Study Value	
F Actions Taken *	<input type="text" value="11"/> Extinguishment by fire Primary Action Taken (1) <input type="text" value="81"/> Incident command Additional Action Taken (2) <input type="text" value="86"/> Investigate Additional Action Taken (3)		G1 Resources *		G2 Estimated Dollar Losses & Values	
Completed Modules	H1* Casualties		H3 Hazardous Materials Release		I Mixed Use Property	
<input checked="" type="checkbox"/> Fire-2 <input checked="" type="checkbox"/> Structure-3 <input type="checkbox"/> Civil Fire Cas.-4 <input checked="" type="checkbox"/> Fire Serv. Cas.-5 <input type="checkbox"/> EMS-6 <input type="checkbox"/> HazMat-7 <input type="checkbox"/> Wildland Fire-8 <input checked="" type="checkbox"/> Apparatus-9 <input checked="" type="checkbox"/> Personnel-10 <input type="checkbox"/> Arson-11	Deaths Injuries Fire Service <input type="text" value=""/> <input type="text" value="001"/> Civilian <input type="text" value=""/> <input type="text" value=""/> H2 Detector Required for Confined Fires. <input type="checkbox"/> Detector alerted occupants <input checked="" type="checkbox"/> Detector did not alert them <input type="checkbox"/> Unknown		<input checked="" type="checkbox"/> Check this box and skip this section if an Apparatus or Personnel form is used. Apparatus Personnel Suppression <input type="text" value="0006"/> <input type="text" value="0012"/> EMS <input type="text" value=""/> <input type="text" value=""/> Other <input type="text" value=""/> <input type="text" value=""/> <input type="checkbox"/> Check box if resource counts include aid received resources.		LOSSES: Required for all fires if known. Optional for non fires. None Property \$ <input type="text" value=""/> , <input type="text" value="030"/> , <input type="text" value="000"/> <input type="checkbox"/> Contents \$ <input type="text" value=""/> , <input type="text" value="000"/> , <input type="text" value="000"/> <input checked="" type="checkbox"/> PRE-INCIDENT VALUE: Optional Property \$ <input type="text" value=""/> , <input type="text" value="030"/> , <input type="text" value="000"/> <input type="checkbox"/> Contents \$ <input type="text" value=""/> , <input type="text" value="000"/> , <input type="text" value="000"/> <input checked="" type="checkbox"/>	
J Property Use*	Structures 131 <input type="checkbox"/> Church, place of worship 161 <input type="checkbox"/> Restaurant or cafeteria 162 <input type="checkbox"/> Bar/Tavern or nightclub 213 <input type="checkbox"/> Elementary school or kindergarten 215 <input type="checkbox"/> High school or junior high 241 <input type="checkbox"/> College, adult education 311 <input type="checkbox"/> Care facility for the aged 331 <input type="checkbox"/> Hospital Outside 124 <input type="checkbox"/> Playground or park 655 <input type="checkbox"/> Crops or orchard 669 <input type="checkbox"/> Forest (timberland) 807 <input type="checkbox"/> Outdoor storage area 919 <input type="checkbox"/> Dump or sanitary landfill 931 <input type="checkbox"/> Open land or field		341 <input type="checkbox"/> Clinic, clinic type infirmary 342 <input type="checkbox"/> Doctor/dentist office 361 <input type="checkbox"/> Prison or jail, not juvenile 419 <input checked="" type="checkbox"/> 1-or 2-family dwelling 429 <input type="checkbox"/> Multi-family dwelling 439 <input type="checkbox"/> Rooming/boarding house 449 <input type="checkbox"/> Commercial hotel or motel 459 <input type="checkbox"/> Residential, board and care 464 <input type="checkbox"/> Dormitory/barracks 519 <input type="checkbox"/> Food and beverage sales 936 <input type="checkbox"/> Vacant lot 938 <input type="checkbox"/> Graded/care for plot of land 946 <input type="checkbox"/> Lake, river, stream 951 <input type="checkbox"/> Railroad right of way 960 <input type="checkbox"/> Other street 961 <input type="checkbox"/> Highway/divided highway 962 <input type="checkbox"/> Residential street/driveway		539 <input type="checkbox"/> Household goods, sales, repairs 579 <input type="checkbox"/> Motor vehicle/boat sales/repair 571 <input type="checkbox"/> Gas or service station 599 <input type="checkbox"/> Business office 615 <input type="checkbox"/> Electric generating plant 629 <input type="checkbox"/> Laboratory/science lab 700 <input type="checkbox"/> Manufacturing plant 819 <input type="checkbox"/> Livestock/poultry storage (barn) 882 <input type="checkbox"/> Non-residential parking garage 891 <input type="checkbox"/> Warehouse 981 <input type="checkbox"/> Construction site 984 <input type="checkbox"/> Industrial plant yard Lookup and enter a Property Use code only if you have NOT checked a Property Use box: Property Use <input type="text" value="419"/> <input type="text" value="1 or 2 family dwelling"/>	

A. FDID * 04405 State * GA Incident Date * MM 10 DD 07 YYYY 2012 Station 20 Incident Number * 12-0074817 Exposure * 000 Delete Change No Activity NFIRS -2 Fire

B Property Details

B1 0001 Not Residential
 Estimated Number of residential living units in building of origin whether or not all units became involved

B2 001 Buildings not involved
 Number of buildings involved

B3 None
 Acres burned (outside fires) Less than one acre

C On-Site Materials or Products None *Complete if there were any significant amounts of commercial, industrial, energy or agricultural products or materials on the Property, whether or not they became involved*

Enter up to three codes. Check one or more boxes for each code entered.

NNN None
 On-site material (1)

 On-site material (2)

 On-site material (3)

1 Bulk storage or warehousing
 2 Processing or manufacturing
 3 Packaged goods for sale
 4 Repair or service

1 Bulk storage or warehousing
 2 Processing or manufacturing
 3 Packaged goods for sale
 4 Repair or service

1 Bulk storage or warehousing
 2 Processing or manufacturing
 3 Packaged goods for sale
 4 Repair or service

D Ignition

D1 UU Undetermined
 Area of fire origin *

D2 UU Undetermined
 Heat source *

D3 UU Undetermined
 Item first ignited * 1 Check Box if fire spread was confined to object of origin

D4 UU Undetermined
 Type of material first ignited Required only if item first ignited code is 00 or <70

E1 Cause of Ignition

Check box if this is an exposure report. Skip to section G

1 Intentional
 2 Unintentional
 3 Failure of equipment or heat source
 4 Act of nature
 5 Cause under investigation
 U Cause undetermined after investigation

E2 Factors Contributing To Ignition

UU Undetermined None
 Factor Contributing To Ignition (1)

 Factor Contributing To Ignition (2)

E3 Human Factors Contributing To Ignition

Check all applicable boxes

1 Asleep None
 2 Possibly impaired by alcohol or drugs
 3 Unattended person
 4 Possibly mental disabled
 5 Physically Disabled
 6 Multiple persons involved

7 Age was a factor
 Estimated age of person involved

1 Male 2 Female

F1 Equipment Involved In Ignition

None If Equipment was not involved, Skip to Section G

 Equipment Involved

Brand

Model

Serial #

Year

F2 Equipment Power

 Equipment Power Source

F3 Equipment Portability

1 Portable
 2 Stationary

Portable equipment normally can be moved by one person, is designed to be use in multiple locations, and requires no tools to install.

G Fire Suppression Factors

Enter up to three codes. None

NNN None
 Fire suppression factor (1)

 Fire suppression factor (2)

 Fire suppression factor (3)

H1 Mobile Property Involved

None

1 Not involved in ignition, but burned
 2 Involved in ignition, but did not burn
 3 Involved in ignition and burned

H2 Mobile Property Type & Make

 Mobile property type

 Mobile property make

Local Use

Pre-Fire Plan Available
 Some of the information presented in this report may be based upon reports from other Agencies

Arson report attached
 Police report attached
 Coroner report attached
 Other reports attached

 Mobile property model Year

 License Plate Number State VIN Number

K1 Person/Entity Involved

Local Option

Business name (if applicable)

Area Code

Phone Number

 Check This Box if same address as incident location. Then skip the three duplicate address lines.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mr., Ms., Mrs.	First Name	MI	Last Name	Suffix					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number	Prefix	Street or Highway			Street Type	Suffix			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>					
Post Office Box	Apt./Suite/Room		City						
<input type="text"/>	<input type="text"/>	<input type="text"/>							
State	Zip Code								

 More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary
K2 Owner
 Same as person involved? Then check this box and skip The rest of this section.

Local Option

Business name (if Applicable)

Area Code

Phone Number

 Check this box if same address as incident location. Then skip the three duplicate address lines.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mr., Ms., Mrs.	First Name	MI	Last Name	Suffix					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number	Prefix	Street or Highway			Street Type	Suffix			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>					
Post Office Box	Apt./Suite/Room		City						
<input type="text"/>	<input type="text"/>	<input type="text"/>							
State	Zip Code								

L Remarks

Local Option

CO. 20 WAS DISPATCHED TO A STRUCTURE FIRE. ON ARRIVAL WE FOUND A BARN THAT HAD BURNED DOWN TO THE GROUND BY THE TIME WE ARRIVED. WE HAD TO CUT A LOCK OFF A GATE TO MAKE ENTRY. THE ENGINE LAID 5 INCH HOSE UP THE DRIVE WAY AND USED THE DECK GUN TO KNOCK DOWN THE FLAMES THAT WERE LEFT BURNING. AFTER THAT 1 INCHES AND 3/4 LINE WAS USED TO TAKE CARE OF THE HOT SPOTS. WHILE WETTING THE HOT SPOTS TOMEKA WEAVER WAS CUT BY A PIECE OF METAL AND WAS TAKEN TO THE HOSPITAL FOR STITCHES. AFTER THE FIRE AND OVER HAUL THE ENGINE MANAGE TO GET STUCK IN SOME SOFT SOIL AND A TOW TRUCK WAS CALL TO GET IT OUT.

10/07/2012 23:10:53 jmwwhitehead

L Authorization

446

Officer in charge ID

DOBSON, BRYAN C

Signature

CAPT

Position or rank

Assignment

10

Month

07

Day

2012

Year

 Check Box if same as Officer in charge.

706

Member making report ID

WHITEHEAD, JAMES M

Signature

FAO

Position or rank

Assignment

10

Month

07

Day

2012

Year