

- REMEMBER TO:**
- Establish Presence as IC
 - Maintain Situational Awareness
 - Operate as a dedicated IC
 - Develop Action Plan
 - Provide Briefing

**SAN LUIS VALLEY
INTERAGENCY
FIRE
MANAGEMENT**

Incident Organizer

East Side Aviation Zone 06				
	RX	TX	TXCG	Name
1	164.1500	164.1500	123.0	RGNF Direct
2	164.1500	164.9125	110.9	Boot
3	164.1500	164.9125	131.8	Methodist
4	164.1500	164.9125	136.5	Bristol
5	164.1500	164.9125	146.2	Gray Back
6	164.1500	164.9125	156.7	San Antonio
7	164.1500	164.9125	167.9	Zapata Repeater
8	163.7125	163.7125		Work 1
9	166.9875	166.9875	123.0	RG Fire Tac 1
10	168.6750	168.6750	123.0	R2 Fire Tac 2
11	154.280W	154.28W	156.7	VFire21
12	168.6500	168.6500	110.9 rx & tx	Natl. Flight Follow
13	168.625	168.625	110.9	Air Guard
14	167.2250	167.2250		A/G East of Hwy 285 (Zone O06/AG35)
15	169.0875	169.0875		A/G East of Hwy 285 (Zone O06/AG58)
16	162.475W	N/A		Weather
West Side Aviation Zone 04				
	RX	TX	TXCG	Name
1	164.1500	164.1500	123.0	RGNF Direct
2	164.1500	164.9125	110.9	Boot
3	164.1500	164.9125	131.8	Methodist
4	164.1500	164.9125	136.5	Bristol
5	164.1500	164.9125	146.2	Gray Back
6	164.1500	164.9125	156.7	San Antonio
7	164.1500	164.9125	167.9	Zapata Repeater
8	163.7125	163.7125		Work 1
9	166.9875	166.9875	123.0	RG Fire Tac1
10	168.6750	168.6750	123.0	R2 Fire Tac 2
11	154.280W	154.280W	156.7	V Fire 21
12	168.6500	168.6500	110.9 rx & tx	Natl. Flight Follow
13	168.625	168.625	110.9	Air Guard
14	167.5250	167.5250		A/G West of Hwy 285 (Zone CO04/AG15)
15	167.4250	167.4250		A/G West of Hwy 285 (Zone CO04/AG13)
16	162.475	N/A		Weather

Incident Name		
Incident Action #		
Fire Code	BLM:	FS:
Other Code		
Unit		

IC#1 Took Command	Date:	Time:
IC#2 Took Command	Date:	Time:

Containment Date & Time		
Control Date & Time		
Final Size By Ownership	BLM:	USFS:
	State:	Private:
	Other:	TOTAL:

Directions and Intent:

MOST INCIDENTS ONLY REQUIRE FILLING OUT THE FIRST FEW PAGES - i.e., TYPE 4 AND 5 INCIDENTS. (In these situations, fill out afterwards when doing your AAR.)

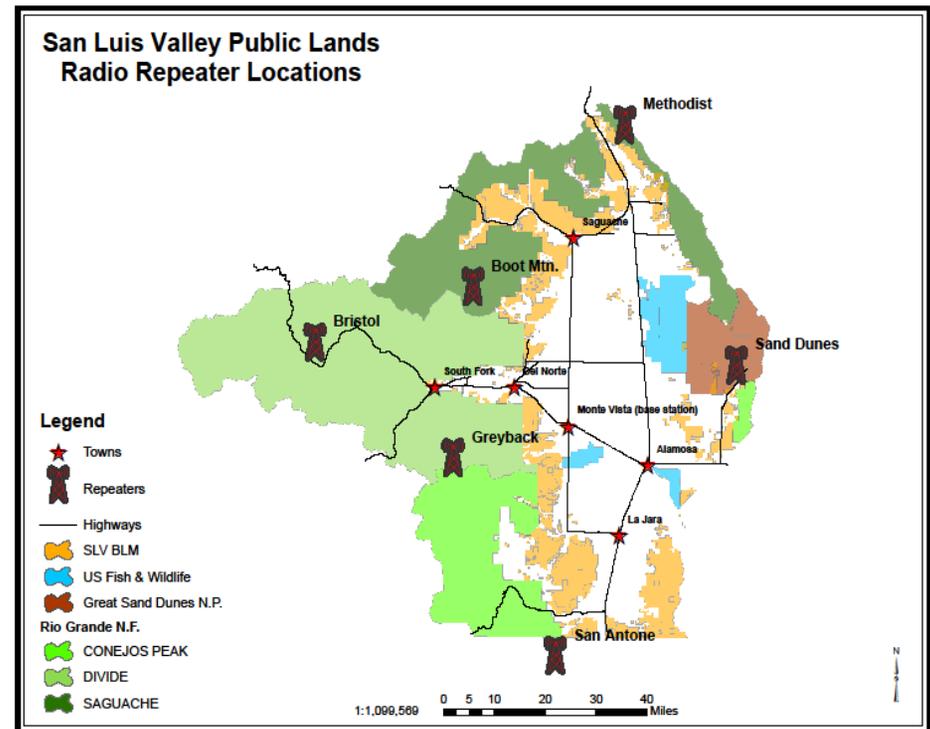
- Intended to provide the IC with a format and focal point to begin processing an incident that is emerging. (Start to plan the fight – delegate – instead of fighting the fight and possibly losing your situational awareness as IC.)
- Use until an Incident is out or operating on an IAP.
- Serves as an Incident Workbook used in conjunction with the Incident Response Pocket Guide, Redbook, Fireline Handbook and/or the SLVIFM Strategy/observations form.
- Red-blocked items are required to be filled in for 30-mile accident prevention (Forest Service).

IC#1 Signature: _____

IC#2 Signature: _____

Fire Name				Incident Action #			Date		
Reported by:				Contact#					
Location:									
Legal:	T-		R-		Sec-				
Coordinates	Lat-			Long-					
IC				IC(T)					
Cause:	<input type="checkbox"/> Lightning - Ensure that 100% of all natural ignitions are evaluated for ecological benefit			<input type="checkbox"/> Human* - Full Suppression					
*Fire Investigator Ordered?	<input type="checkbox"/> No <input type="checkbox"/> Yes		Name:						
Estimated Size:	acres		Ownership						
Est. Containment Date/Time (if appropriate):				Est. Control Date/Time (if appropriate):					
Initial Resources Responding									
Is there a threat to Wildland/Urban Interface?	<input type="checkbox"/> No <input type="checkbox"/> Yes								
Are life or property (structures) threatened?	<input type="checkbox"/> No <input type="checkbox"/> Yes - specify:								
Does the fire constitute any control problems?	<input type="checkbox"/> No <input type="checkbox"/> Yes - specify:								
Are additional resources ordered?	<input type="checkbox"/> No <input type="checkbox"/> Yes - specify:								
Observed Hazard(s):									
Spread Potential:	1. Low	2. Moderate	3. High	4. Extreme					
Character of Fire:	1. Smoldering	3. Running	5. Torching	Crown/spotting					
	2. Creeping	4. Spotting	6. Crowning	8. Erratic					
Slope:	%		Flame Length						
Position on Slope:	1. Ridgetop		4. Middle 1/3 of slope			7. Valley bottom			
	2. Saddle		5. Lower 1/3 of slope			8. Mesa/Plateau			
	3. Upper 1/3 of slope		6. Canyon bottom			9. Flat/Rolling			
Aspect:	1. Flat	2. N	3. NE	4. E	5. SE				
	6. S	7. SW	8. W	9. NW	Ridgetop				
Fuel Type:	1. Grass		4. Pinon/Juniper		7. Aspen				
	2. Grass/brush		5. Lodgepole/pine		8. Logging/Thinning Slash				
	3. Oakbrush		6. Spruce/fir		9. Other (specify)				
Fuel Load	<input type="checkbox"/> Light		<input type="checkbox"/> Moderate		<input type="checkbox"/> Heavy				
Adjacent Fuel Load	<input type="checkbox"/> Light		<input type="checkbox"/> Moderate		<input type="checkbox"/> Heavy				
Weather Conditions:	1. Clear			2. Scattered Clouds					
	3. Building Cumulus			4. T-storms					
	5. Lightning			6. Overcast					
	7. Light Rain			8. Heavy Rain					
Wind:	Speed (mph):		Direction						
Elevation (ft)			Today's ERC or BI of unit						

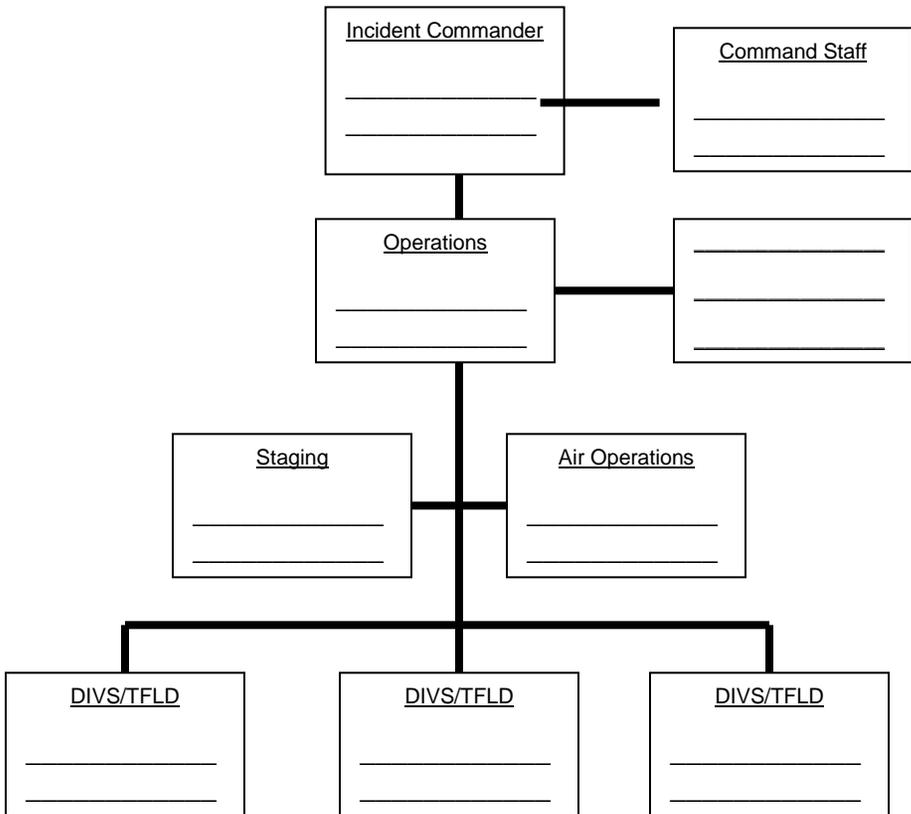
After Action Review	
INCIDENT NAME:	IC:
DATE:	Incident Complexity:
Names of attendees	
What was planned? What actually happened? What was the difference, if any, between questions one and two? What can you do different next time to meet objectives?	
AAR Leader Signature:	Date:



Incident Objectives
1. SAFETY of firefighters and public.
2.
3.
4.
Your goal is to manage the incident and not create another.

(Examples: protect structures, keep fire to east of road, river or ridge)

INCIDENT ORGANIZATION



Spot Weather Observation and Forecast Request (See reverse for instructions)									
Requesting Agency will Furnish Information for Blocks 1-12									
1. Name of Incident or Project			2. Control Agency			3. Request Made			
						Time:		Date:	
4. Location (Designate Township, Range, and Section (include ¼ section):					5. Drainage Name		6. Exposure/Aspect:		
7. Size of Incident or Project (acres):			8. Elevation		9. Fuel Type:		10. Project On:		
			Top	Bottom			<input type="checkbox"/> Ground <input type="checkbox"/> Crowning		
11. Weather Conditions at Incident or Project or from RAWS:									
Place	Elevation	Observation Time	Wind Direction/Velocity		Temperature		No entry necessary. To be completed by the Fire Weather Forecaster.		Remarks <small>(Indicate precipitation, cloud type and % cover, wind and frontal conditions, etc.)</small>
			20-Foot:	Eye Level:	Dry Bulb:	Wet Bulb:	Rh	Dp	
12. Send Forecast To (Person):			Send Forecast To (Location):			Send Forecast Via:		Send Copy To:	
The Fire Weather Forecaster will Furnish the Information for Block 13:									
13. Discussion and Outlook:								Date and Time:	
Burn Period	Sky Cover	Temperature	Humidity	Wind		Indices			
				Eye Level	20-Foot				
<input type="checkbox"/> Today (sunrise to dusk) <input type="checkbox"/> This Afternoon (noon until dusk) <input type="checkbox"/> This Evening (1600 until dusk) <input type="checkbox"/> Tonight (sunset until sunset)	<input type="checkbox"/> Mostly Sunny/Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	°F _____ <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Range	_____% <input type="checkbox"/> Maximum <input type="checkbox"/> Minimum <input type="checkbox"/> Range	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction_____ Velocity____mph Gusts____mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction_____ Velocity____mph Gusts____mph	Haines: LAL: BI: CI:			
<input type="checkbox"/> Today (sunrise to dusk) <input type="checkbox"/> This Afternoon (noon until dusk) <input type="checkbox"/> This Evening (1600 until dusk) <input type="checkbox"/> Tonight (sunset until sunset)	<input type="checkbox"/> Mostly Sunny/Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	°F _____ <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Range	_____% <input type="checkbox"/> Maximum <input type="checkbox"/> Minimum <input type="checkbox"/> Range	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction_____ Velocity____mph Gusts____mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction_____ Velocity____mph Gusts____mph	Haines: LAL: BI: CI:			
Outlook for (Date):	<input type="checkbox"/> Mostly Sunny/Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	°F _____ <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Range	_____% <input type="checkbox"/> Maximum <input type="checkbox"/> Minimum <input type="checkbox"/> Range	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction_____ Velocity____mph Gusts____mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction_____ Velocity____mph Gusts____mph	Haines: LAL: BI: CI:			

Work Rest Ratio Documentation Worksheet

This worksheet is designed to help the IC document and calculate amount of rest required to meet the Work/Rest guidelines.

- For every 2 hours of work or travel provide 1 hour of sleep or rest.
- IC must justify and document work shifts exceeding 16 hours and those that do not meet the 2:1 work/rest guidelines -- see below.

Date	Operational Period Start Time	Operational Period Stop Time	Total Hours Worked	Rest Time (document hours when employee or module rested)
Approval for shift lengths exceeding 16 hrs given by:			Date/ Time Approval Given:	
IC Signature:			Date:	

MAP SKETCH

Prepared by:	Position:	Date/Time
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<i>Radio Frequencies</i>	
<i>Net</i>	<i>Frequency</i>
Command	<i>Rx</i>
	<i>Tx</i>
Support/Dispatch	<i>Rx</i>
	<i>Tx</i>
Tac 1	<i>Rx</i>
	<i>Tx</i>
Tac 2	<i>Rx</i>
	<i>Tx</i>
Air-to-Ground	<i>Rx</i>
	<i>Tx</i>
Air-to-Air	<i>Rx</i>
	<i>Tx</i>

