

GM # \_\_\_\_\_

**PAYETTE DISPATCH CREWS REQUEST**

Phone: 208-425-8613 | Email: [idpac@firenet.gov](mailto:idpac@firenet.gov) | Expanded: [idpac\\_expanded@firenet.gov](mailto:idpac_expanded@firenet.gov)  
<https://gacc.nifc.gov/gbcc/dispatch/id-pac/>

INCIDENT NAME	INCIDENT NUMBER	FINANCIAL CODE

NEEDED DATE:	NEEDED TIME:
REQUESTOR NAME AND POSITION:	REQUESTOR PHONE #:

REPORTING LOCATION & NAVIGATION INSTRUCTIONS:

<u>CREW TYPE</u> CATALOG ITEM	<u>QUANTITY</u>	<u>SPECIAL NEEDS</u> <i>*If name request, complete the Details section on Page 2.</i>	<u>INCLUSIONS</u>	<u>EXCLUSIONS</u>

**ORDERING OPTIONS**

**Crew Type** – What type of crew would you like to order?  
**Quantity** – How many would you like to order?  
**Special Needs Options**– Must be self-sufficient; Approved: Cell phone, Laptop and/or Tablet (Device approval not applicable to Contract or VIPR); Transportation Needed; Break down capable; Double lunch; If camp crew: How many personnel needed; Come ready with tools  
**Inclusion Options** - None, Federal only, Host agency only, State only, Contractor acceptable, Portal to portal acceptable  
**Exclusion Options** – Contractor not acceptable, Portal to portal not acceptable

**OTHER SPECIAL NEEDS, CREW MEMBER ROSTER, POINT OF CONTACT, AND/OR REMARKS:**

**\* NAME REQUEST DETAILS**

**CREW NAME:**

**PHONE NUMBER:**

**HOME DISPATCH ID:**

**AVAILABLE IN IROC:**

YES

NO

**AWARE OF ORDER:**

YES

NO

**ALL NAME REQUESTS MUST HAVE A JUSTIFICATION. CAN NOT NAME REQUEST CONTRACTED CREWS OR TYPE 1 CREWS!**

**JUSTIFICATION FOR NAME REQUEST:**

**NAME REQUEST JUSTIFICATION EXAMPLES:** "Smokey Bear" is a critical need for meeting objectives with suppression/pre-suppression operations. "Smokey Bear" is familiar with local policies, terrain, and operations.

**\* NAME REQUEST DETAILS**

**CREW NAME:**

**PHONE NUMBER:**

**HOME DISPATCH ID:**

**AVAILABLE IN IROC:**

YES

NO

**AWARE OF ORDER:**

YES

NO

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