



Moab Interagency Fire Incident Organizer

Updated 4/1/2016



Prior to responding to an incident obtain the following information:

Incident Name	
Incident Number	UT-
Initial Location	

Command Freq.	
Tactical Freq.	
Air to Ground Freq.	
Air to Air Freq.(as needed)	

Complete the following table before submitting:

P# / Fire Code #	
District / Unit	
Report Completion Date	

The final IC will submit the Incident Organizer along with all other associated documentation to **MIFC – 82 E Dogwood, Moab UT 84532. NLT 5 days after the fire is called out. MIFC 435-259-1850**

/Signatures/	
I.C.: _____	Date: _____
FMO/AFMO: _____	Date: _____

MEMORANDUM

February 1,
2016

To: Type 3,4, and 5 Incident Commanders
From: Moab Interagency Fire Management Board
Subject: Expectations and Responsibilities for Type 3, 4, and 5
Incident Commanders

The following list of expectations and responsibilities will help each of you in the role of Incident Commander.

- **Firefighter and public safety will be your highest priority on every fire.**
- Develop, implement, and monitor safe and effective Incident Action Plan objectives and viable strategies and tactics for the incident, which reflect local fire and resource management goals. Use the most up to date modeling to support decisions.
- Disengage suppression activities immediately if strategies, tactics, and communications cannot be maintained safely. Every firefighter has the right to know their assignments are safe.
- Implement the Risk Management Process, as outlined in the *Incident Response Pocket Guide*.
- Maintain command and control of the incident at all times. Document any Transfer of Command and relay this information to all fireline personnel and dispatch.
- Give complete briefings to fireline personnel (see the *Incident Response Pocket Guide*) and document all briefings on the Resource Summary.
- **Do not assume collateral duties** as Type 3 Incident Commanders.
- Monitor fatigue levels. Ensure crews, overhead, and support personal are getting a 2:1 work/rest ratio. Written justification is required for any shift over 16 hours after the first operational period and mitigation measures must be taken.
- The 10 standard firefighting orders are firm, do not bend or break them. Willful violations of the 10 Fire Orders and the 18 Watch Out Situations will result in disciplinary action and could be grounds for removal.
- Expect Fire Managers and Line Officers to inspect fires (occasionally for Type 4 & 5, all Type 3) for compliance with LCES, 10 Fire Orders, and 18 Watch Out Situations.
- Regularly verify, communicate, and update common incident information to the public as well as internal and external stakeholders. Ensure that Interagency coordination partners by fully involved in the planning process.
- Treat the public respectfully and with due courtesy.
- Promote the Principles of a High Reliability Organization (HRO) on every incident.
- On long term incidents carefully monitor and watch for changing fuel conditions.
- Complete the Incident After Action Review.
- **This booklet will be completed on all Type 3, 4, and 5 Forest Service and State incidents.**
- **This booklet will be completed on all Type 3 and 4 BLM incidents.**

We have the utmost respect for your knowledge and professionalism. You serve an extremely important leadership role. Please understand that your actions will be supported in any cases where you take appropriate precautions to safeguard firefighters and the public.

TABLE OF CONTENTS AND INSTRUCTIONS

Document Name	Required Documentation for:	Pg.
* Initial Fire Size-UP	All Fires	4
Medical Plan	All Fires	5
* Incident Complexity Analysis	All Fires	6
* Incident Commander SOP Checklist	All Fires	7
Unit Log	Any major event on all fires	8-10
* Documentation for Shifts in Excess of 16 hours and 2:1 work rest.	All fires where operational shifts exceed 2:1 work/rest ratio.	11
* Incident After Action Review	All Fires. Agency Official may review and sign.	12
* Final Fire Report	All Fires	13
Spot Weather Request and Forecast	All fires that will not be controlled in the current burn period or if a Red Flag Warning or Fire Weather Watch has been issued.	14-15
Fire Cause Determination Report	All suspected human caused fires	16-17
* Incident Action Plan	An IAP is required on the 2 nd day of an uncontained fire. Objectives required for all USFS	18-19
Incident Status Summary (ICS-209)	All fires in Timber over 100 acres and in grass over 300 acres.	20-21
Logistics Help Page	Reference Document	22
* Resource Summary	All Fires	23
* Denotes Forms required to be filled in for 30-Mile accident prevention (FS)		

Initial Fire Size-Up

Fire Name:				IC Name:			
Fire Number:		USDA:		DOI:		State:	
Descriptive Location:							
Coordinates at Origin:		Geographic:		Lat.		Long.	
		UTM (nad83):		E.		N.	
		Legal:		Tn.		Rg.	
Estimated Size(acres):				Ownership:			
Apparent Cause:		<input type="checkbox"/> Natural <input type="checkbox"/> Human -->		Fire investigator Name:			
Are structures threatened?		<input type="checkbox"/> No <input type="checkbox"/> Yes(specify)					
Any control problems?		<input type="checkbox"/> No <input type="checkbox"/> Yes(specify)					
Additional resources needed?		<input type="checkbox"/> No <input type="checkbox"/> Yes(specify)					
Any other values threatened?		<input type="checkbox"/> No <input type="checkbox"/> Yes(specify)					
Burning in or towards fuel units?		<input type="checkbox"/> No <input type="checkbox"/> Yes(specify)					
Hazards:							
Estimated Containment:		Date		Time			
Estimated Control:		Date		Time			
Fire Complexity		<input type="checkbox"/> Type III		<input type="checkbox"/> Type IV		<input type="checkbox"/> Type V	
Spread Potential		<input type="checkbox"/> 1. Low		<input type="checkbox"/> 2. Moderate		<input type="checkbox"/> 3. High <input type="checkbox"/> 4. Extreme	
Fire Behavior		<input type="checkbox"/> 1. Smoldering <input type="checkbox"/> 3. Running		<input type="checkbox"/> 5. Torching		<input type="checkbox"/> 7. Crown/Spotting	
		<input type="checkbox"/> 2. Creeping <input type="checkbox"/> 4. Spotting		<input type="checkbox"/> 6. Crowning		<input type="checkbox"/> 8. Erratic	
Flame Length							
Slope at head of fire		<input type="checkbox"/> 1. 0-25%		<input type="checkbox"/> 2. 26-40%		<input type="checkbox"/> 3. 41-55% <input type="checkbox"/> 4. 56-75% <input type="checkbox"/> 5. 76+%	
Position on Slope		<input type="checkbox"/> 1. Ridge Top		<input type="checkbox"/> 4. Middle 1/3 of slope		<input type="checkbox"/> 7. Valley Bottom	
		<input type="checkbox"/> 2. Saddle		<input type="checkbox"/> 5. Lower 1/3 of slope		<input type="checkbox"/> 8. Mesa/Plateau	
		<input type="checkbox"/> 3. Upper 1/3 of slope		<input type="checkbox"/> 6. Canyon Bottom		<input type="checkbox"/> 9. Flat or rolling	
Aspect		<input type="checkbox"/> 0. Flat <input type="checkbox"/> 2. NE		<input type="checkbox"/> 4. SE		<input type="checkbox"/> 6. SW <input type="checkbox"/> 8. NW	
		<input type="checkbox"/> 1. N <input type="checkbox"/> 3. E		<input type="checkbox"/> 5. S		<input type="checkbox"/> 7. W <input type="checkbox"/> 9. Ridgetop	
Fuel Type		<input type="checkbox"/> 1. Short Grass (1 ft)		<input type="checkbox"/> 5. Brush (2 ft)		<input type="checkbox"/> 9. Hardwood Litter	
		<input type="checkbox"/> 2. Timber w/ Grass		<input type="checkbox"/> 6. Dormant Brush		<input type="checkbox"/> 10. Timber (litter & understory)	
		<input type="checkbox"/> 3. Tall Grass (3 ft)		<input type="checkbox"/> 7. Southern Rough		<input type="checkbox"/> 11. Light Logging Slash	
		<input type="checkbox"/> 4. Chaparral Brush (6 ft)		<input type="checkbox"/> 8. Closed Timber Litter		<input type="checkbox"/> 12. Medium Logging Slash	
Wind Speed (mph):				Gusts (mph):			
Wind Direction		<input type="checkbox"/> 0. Calm <input type="checkbox"/> 2. NE		<input type="checkbox"/> 4. SE		<input type="checkbox"/> 6. SW <input type="checkbox"/> 8. NW	
		<input type="checkbox"/> 1. N <input type="checkbox"/> 3. E		<input type="checkbox"/> 5. S		<input type="checkbox"/> 7. W <input type="checkbox"/> 9. Erratic	
Current Weather Conditions:							
Elevation		_____ Ft					
Staging Area Location:							
LCES in Place (Refer to IRPG)		<input type="checkbox"/> No <input type="checkbox"/> Yes					

INCIDENT COMPLEXITY ANALYSIS (Type 3, 4, 5)

Fire Behavior	Yes*	No
Fuels extremely dry and susceptible to long-range spotting or you are currently experiencing extreme fire behavior.		
Weather forecast indicating no significant relief or worsening conditions.		
Current or predicted fire behavior dictates indirect control strategy with large amounts of fuel within planned perimeter.		
Firefighter Safety		
Performance of firefighting resources affected by cumulative fatigue.		
Overhead overextended mentally and/or physically.		
Communication ineffective with tactical resources or dispatch.		
Organization		
Operations are at the limit of span of control.		
Incident action plans, briefings, etc. missing or poorly prepared.		
Variety of specialized operations, support personnel or equipment.		
Unable to properly staff air operations.		
Limited local resources available for initial attack.		
Heavy commitment of local resources to logistical support.		
Existing forces worked 24 hours without success.		
Resources unfamiliar with local conditions and tactics.		
Values to be Protected		
Urban interface; structures, developments, recreational facilities, or potential for evacuation.		
Fire burning or threatening more than one jurisdiction and potential for unified command with different or conflicting management objectives.		
Unique natural resources, special-designation areas, critical municipal watershed, T&E species habitat, cultural value sites.		
Sensitive political concerns, media involvement, or controversial fire policy.		

*** If you have checked "Yes" on 3 to 5 of the analysis boxes, consider requesting the next level of incident management support.**

Type 5 Characteristics: (a) Ad hoc organization managed by a type 5 IC. (b) Primarily local resources used. (c) ICS command and general staff positions are not activated. (d) Resources vary from two to six firefighters. (e) Incident is generally contained within the first burning period and often within a few hours after resources arrive on scene. (f) Additional firefighting resources or logistical support are not usually required.

Type 4 Characteristics: (a) Ad hoc organization managed by a type 4 IC. (b) Primarily local resources. (c) ICS command and general staff positions are not activated. (d) Resources vary from a single resource to multiple resource task forces or strike teams. (e) Incident is usually limited to one operational period in the control phase. Mopup may extend into multiple operational periods. (f) Written incident action plan (IAP) is not required. A documented operational briefing will be completed for all incoming resources. Refer to the **Incident Response Pocket Guide** for a briefing checklist.

Type 3 Characteristics: Type 3 IC'S are qualified according to the 310-1. No non-fire concurrent responsibilities or single resource boss duties. Not all type 3 complexity incidents require full command and general staff positions. As an incident escalates, a continuing reassessment of the complexity level should be done. (a) Ad hoc or pre-established type 3 organization managed by an ICT3. (b) Some or all of ICS functional areas activated as necessary to manage the incident. (c) Incident Complexity Analysis process is formalized and certified daily. It is the IC's responsibility to continually reassess the complexity level of the incident. When the complexity analysis indicates a higher complexity level the IC must ensure that suppression operations remain within the scope and capability of the existing organization and that span of control is consistent with established ICS 19 standards. (d) Local and non-local resources used. (e) Resources vary from several resources to several task forces/strike teams. (f) May be divided into divisions. (g) May require staging areas and incident base. (h) May involve low complexity aviation operations. (i) May involve multiple operational periods prior to control, which may require a written Incident Action Plan (IAP).

Incident Commander SOP Checklist

- Verify all frequencies assigned and all units responding to the fire.
- Name the fire and obtain a fire number from MIFC. Use the closest geographical reference and keep it short.
- Flag the route to the fire. Start from major roads and clearly flag each turn on both sides of road.
- Designate a briefing and staging area. All resources will be checked in and briefed.
- Post lookouts, ensure communications work and identify escape routes and safety zones.
- Coordinate with state/county fire wardens to account for all fire department resources. Make contact on State Fire 154.280 Tx/Rx.
- Ensure an Interagency Cost Share Agreement has been completed as per agency guidelines for multi-jurisdictional incidents.
- Complete the Initial Size-up Briefing on the Initial Field Fire Report and relay this information to MIFC on the radio.
- Complete the Incident Complexity Analysis. Ensure the proper management is in place or ordered.
- Develop objectives for your incident. Use strategies and tactics that are safe and achieve the objectives. All Type 3 fires require a written IAP. Incident objectives should be consistent with Land Use Plan resource objectives.
- When the fire is suspected to be human caused; complete the Fire Cause Determination Report and order a Fire Investigator.
- Determine ownership, if ownership of the fire is not clear relay LAT / LONG DDMSS (NAD 83) to MIFC. If the fire could be close to 1/10th of an acre or larger, GPS the perimeter and submit to agency GIS specialist.
- Establish a unified command when appropriate. Ensure MIFC and all resources on the fire know who is in command.
- Order the necessary and appropriate operational resources through MIFC. Plan for operational resources needed to control the fire.
- Ensure all contract resources are inspected through MIFC prior to obtaining an assignment.
- MIFC will coordinate with county dispatch centers for EMS and local law enforcement issues upon request.
- Complete the Spot Weather Forecast Request and relay the information to MIFC on all fires that will not be controlled in the current burn period or if a RED FLAG WARNING or FIRE WEATHER WATCH has been issued.
- Notify MIFC if dispatch will need to extend staffing.
- Submit a completed Intelligence Summary (ICS-209) to MIFC by 1600 for all action fires in timber over 100 acres and in grass or brush over 300 acres. Submit daily 209 updates until the fire is controlled—then submit a final 209.
- Logistic orders (I.E. meals, beverages and other supplies) must be submitted by 1000 to receive meals that same day and by 1600 to receive meals and supplies the next morning.
- Facilitate incident AARs after each operation period. Document a final incident AAR after the fire is controlled.
- Complete all appropriate CTRs, shift tickets, general messages, and evaluations for all resources prior to their demob.
- Keep MIFC informed on changes in conditions/personnel hourly or as needs arise.
- Demob resources according to driving limits and work/rest issues..
- Complete the Final Fire Report Data form in the Incident Organizer when the fire is declared out.

***Incident After Action Review**

Date:

Conducted by:

What was planned?

What actually happened?

Why did it happen?

What can we do next time?

Is there a need to file a SAFENET/SAFECOM (Circle)

Yes

No

X _____

(Appropriate Agency Reviewing Official)

(Title)

(Date)

Final Fire Report

Fire Name: USDA:	DOI:	State:	
Descriptive Location:			
Discovery Date: (mm/dd/yyyy)	Time:	<input type="checkbox"/> Estimated <input type="checkbox"/> Actual	
Initial Attack Date: (mm/dd/yyyy)	Time:	<input type="checkbox"/> Estimated <input type="checkbox"/> Actual	
Contain Date: (mm/dd/yyyy)	Time:	<input type="checkbox"/> Estimated <input type="checkbox"/> Actual	
Control Date: (mm/dd/yyyy)	Time:	<input type="checkbox"/> Estimated <input type="checkbox"/> Actual	
Out Date: (mm/dd/yyyy)	Time:	<input type="checkbox"/> Estimated <input type="checkbox"/> Actual	
Final Fire Acres:	Acres by Ownership		
	BLM	USFS	STATE NPS
Coordinates at Origin:	Geographic: Lat.	Long.	
	UTM (nad83): E.	N.	
	Legal: Tn.	R.	Se. ¼ Se.
Elevation(ft):	Slope(%):		County:
Reported by:	<input type="checkbox"/> 1 FS Lookout <input type="checkbox"/> 2 Other Lookout <input type="checkbox"/> 3 FS Patrol <input type="checkbox"/> 4 Other FS Employee <input type="checkbox"/> 5 Cooperator <input type="checkbox"/> 6 FS Permittee <input type="checkbox"/> 7 FS Aircraft <input type="checkbox"/> 8 Other Aircraft <input type="checkbox"/> 9 Infrared <input type="checkbox"/> 10 Other		
	Statistical Cause: <input type="checkbox"/> 1 Lightning <input type="checkbox"/> 2 Equipment Use <input type="checkbox"/> 3 Smoking <input type="checkbox"/> 4 Campfire <input type="checkbox"/> 5 Debris Burning <input type="checkbox"/> 6 Railroad <input type="checkbox"/> 7 Arson <input type="checkbox"/> 8 Children <input type="checkbox"/> 9 Misc. (Specify)		
General Cause:	<input type="checkbox"/> 1 Timber Harvest <input type="checkbox"/> 2 Harvest Other Prod <input type="checkbox"/> 3 Forest/Range mgt. activities <input type="checkbox"/> 4 Highway <input type="checkbox"/> 5 Power Reclaim <input type="checkbox"/> 6 Hunting <input type="checkbox"/> 7 Fishing <input type="checkbox"/> 8 Other Rec. <input type="checkbox"/> 9 Resident <input type="checkbox"/> 10 Other		
	Specific Cause: <input type="checkbox"/> 1 Lightning <input type="checkbox"/> 2 Aircraft <input type="checkbox"/> 3 Vehicle Burn <input type="checkbox"/> 4 Exhaust-Power Saw <input type="checkbox"/> 5 Exhaust - other <input type="checkbox"/> 6 Logging <input type="checkbox"/> 7 Brakes <input type="checkbox"/> 8 Cook Fire <input type="checkbox"/> 9 Warming Fire <input type="checkbox"/> 10 Smoking <input type="checkbox"/> 11 Trash Burn <input type="checkbox"/> 12 Burn Dump <input type="checkbox"/> 13 Field Burn <input type="checkbox"/> 14 Land Clearing <input type="checkbox"/> 15 Slash Burn <input type="checkbox"/> 16 Right-of-way Burn <input type="checkbox"/> 17 Resource mgt Burn <input type="checkbox"/> 18 Grudge Fire <input type="checkbox"/> 19 Pyromania <input type="checkbox"/> 20 Smoke out Bees/Game <input type="checkbox"/> 21 Insect/Snake Control <input type="checkbox"/> 22 Job Fire <input type="checkbox"/> 23 Blasting <input type="checkbox"/> 24 Burning Building <input type="checkbox"/> 25 Powerline <input type="checkbox"/> 26 Fireworks <input type="checkbox"/> 27 Play w/matches <input type="checkbox"/> 28 Repel Predators <input type="checkbox"/> 29 Stove Fuel <input type="checkbox"/> 30 Other		
Class of People:	<input type="checkbox"/> 1 Owner <input type="checkbox"/> 2 Permittee <input type="checkbox"/> 3 Contractor <input type="checkbox"/> 4 Public Employee <input type="checkbox"/> 5 Local Permanent <input type="checkbox"/> 6 Seasonal <input type="checkbox"/> 7 Transient <input type="checkbox"/> 8 Other <input type="checkbox"/> 9 Visitor <input type="checkbox"/> 0 Not person caused		
	NFFL Fuel Model: <input type="checkbox"/> 1. Short Grass (1 ft) <input type="checkbox"/> 2. Timber w/ Grass <input type="checkbox"/> 3. Tall Grass (3 ft) <input type="checkbox"/> 4. Chaparral Brush (6 ft) <input type="checkbox"/> 5. Brush (2 ft) <input type="checkbox"/> 6. Dormant Brush <input type="checkbox"/> 7. Southern Rough <input type="checkbox"/> 8. Closed Timber Litter <input type="checkbox"/> 9. Hardwood Litter <input type="checkbox"/> 10. Timber (litter & understory) <input type="checkbox"/> 11. Light Logging Slash <input type="checkbox"/> 12. Medium Logging Slash <input type="checkbox"/> 13. Heavy Logging Slash		
NFDRS Fuel Model:	<input type="checkbox"/> A Annual Grasses <input type="checkbox"/> C Open Timber w/Grass <input type="checkbox"/> F Mature, closed Oak, open PJ <input type="checkbox"/> H Conifer Little Understory <input type="checkbox"/> G Dense Conifer w/Litter <input type="checkbox"/> O Dense Tamarisk, Salt Cedar <input type="checkbox"/> T Sagebrush/Grass		

Attach a map with the polygon of the fire. Include TRS cross on map for reference.

This is required for all agencies, on all fires.

Spot Weather Request

Time:		Date:		Incident Name:						
Requesting Agency:				Requesting Official:						
Contact Person:				Fax #:		Phone #:				
Incident Date: Time:				Elevation: Top: Bottom:						
Lat/Long:				Drainage:						
Aspect:		Sheltering: <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Unsheltered								
Fuel Type:	<input type="checkbox"/> Grass	<input type="checkbox"/> Brush	<input type="checkbox"/> Timber	<input type="checkbox"/> Slash	<input type="checkbox"/> Timber w/Grass	<input type="checkbox"/> Other				
Fuel Model:	<input type="checkbox"/> 1,2,3	<input type="checkbox"/> 4,5,6,7	<input type="checkbox"/> 8,9,10	<input type="checkbox"/> 11,12,13						
Location and name of nearest weather observing station (distance and direction from project):										
Weather Observations from project or nearby station(s): (winds in compass direction e.g. N, NW, etc)										
Place:	Elev:	Obs Time	20 ft Wind		Eye Lev. Wind		Temp		Moisture	Remarks
			Dir:	Speed:	Dir:	Speed:	Dry:	Wet:		
Requested Forecast Period:					Primary Forecast Elements (check all that are needed)					
Date					(For management ignited wildland fires, provide prescription parameters.)					
Start					Sky/Weather: <input type="checkbox"/>					
End					Temperature: <input type="checkbox"/>					
Forecast needed for:					Humidity: <input type="checkbox"/>					
<input type="checkbox"/> Today					20 ft Wind: <input type="checkbox"/>					
<input type="checkbox"/> Tonight					Valley: <input type="checkbox"/>					
<input type="checkbox"/> Day 2					Ridge Top: <input type="checkbox"/>					
<input type="checkbox"/> Extended					Other <input type="checkbox"/>					
					Specify:					

SPOT WEATHER FORECAST

The Fire Weather Forecaster will Furnish the Following:

Discussion Outlook:

Date and Time:

Burn Period	Sky Cover	Temperatures	Humidity	Eye-level Wind	20-foot Wind	Indices
<input type="checkbox"/> Today (sunrise to dusk) <input type="checkbox"/> This Afternoon (noon until dusk) <input type="checkbox"/> This Evening (16:00 until dusk) <input type="checkbox"/> Tonight (sunset until sunrise)	<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 Clouds	_____ 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: Clearing Index:
<input type="checkbox"/> Today (sunrise to dusk) <input type="checkbox"/> This Afternoon (noon until dusk) <input type="checkbox"/> This Evening (16:00 until dusk) <input type="checkbox"/> Tonight (sunset until sunrise)	<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 Clouds	_____ 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: Clearing Index:
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 Clouds	_____ 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: Clearing Index:

Name of Fire Weather Forecaster:

Fire Weather Office Issuing Forecast:

Forecast Received by (Name):

Date:

Time:

Forecast Received at (Location) via:

Fire Cause Determination Report

FIRE NAME:

DATE (mm/dd/yy):

FIRE #:

REPORT COMPLETED BY:

LAND STATUS AT ORIGIN: FEDERAL (LIST) [] _____ STATE [] PRIVATE []

LOCATION OF ORIGIN (UTM): Zone _____ N _____ E _____

SEQUENCE OF EVENTS	DATE	TIME	(List name & agency)
ESTIMATED TIME OF ORIGIN	_____	BY	_____
REPORTED	_____	BY	_____ TO _____
FIRST ON SCENE	_____	WHO?	_____
ORIGIN PROTECTED, BEGIN	_____	BY	_____
SEARCH, BEGIN:	_____	BY	_____
ORIGIN RELEASED	_____	BY	_____ TO _____

ORIGIN DETERMINATION

SIZE OF AREA SEARCHED: _____ X _____ PERIMETER SEARCH DONE? [] YES [] NO

ORIGIN DETERMINED BY: [] Burn Pattern [] Witness [] Other(Describe) _____ [] Not Found

Fire Cause:	() 3. Smoking	() 6. Railroad	() 9. Other
() 1. Lightning	() 4. Camp Fire	() 7. Arson	(explain:)
() 2. Equipment Use	() 5. Debris Burning	() 8. Children	

IF you check "YES" for any of the following criteria, ORDER AN LEO

CRITERIA FOR LEO DISPATCH

1) ARE THERE WITNESSES? [] YES [] NO NAME OR DESCRIBE: _____
(phone#/address/other) _____

2) ARE THERE SUSPECTS? [] YES [] NO NAME OR DESCRIBE: _____
(phone#/address/other) _____

3) ANY VEHICLES? [] YES [] NO DESCRIBE: _____
LICENSE # _____ STATE: _____ COLOR: _____ MAKE: _____ MODEL: _____

4) SUSPECT ARSON? [] YES [] NO DESCRIBE: _____

5) ANY EVIDENCE? [] YES [] NO DESCRIBE: _____ Does evidence
need to be collected? [] YES [] NO

PHOTOGRAPHS TAKEN? [] YES (Use photo log) [] NO

Fire Cause Determination Report –cont.-

DESCRIBE EVENTS, SCENE, & ANY OTHER INFORMATION (use another page if necessary):

SKETCH OF AREA OF ORIGIN

NOT TO SCALE

1. Indicate north 2. Create legend

WEATHER (upon arrival)

TIME:	DRY BULB:	WET BULB:	RH:	WD:	WS:
-------	-----------	-----------	-----	-----	-----

PHOTOGRAPH LOG

PHOTO#	DESCRIPTION (<i>Indicate direction</i>)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	

INCIDENT ACTION PLAN		Incident name	Number	Date Prepared	Time Prepared			
		Operational Period			Date:	Shift:		<input type="checkbox"/> Day
*Objectives for the Incident								
1.	SAFETY to firefighters and general public for the duration of the incident.							
2.								
3.								
4.								
5.								
Weather Forecast for Operational Period								
BURN PERIOD	CLOUD COVER	TEMPERATURE	HUMIDITY	WIND		<input type="checkbox"/> EYE-LEVEL <input type="checkbox"/> 20-FOOT		HANES INDEX
				DIRECTION	SPEED			
General/Safety Message								
Medical Plan								
HOSPITAL & AID STATIONS								
NAME	LOCATION	TRAVEL TIME		PHONE	HELIPAD		BURN CENTER	
		AIR	GROUND		YES	NO	YES	NO
MEDICAL EMERGENCY PROCEDURES								
Major Medical Injuries:		Notify Incident Commander, who will initiate medical evacuation.						
Minor Medical Injuries:		Notify immediate Line Supervisor on appropriate tactical frequency; initiate appropriate first aid procedures.						

LOGISTICS HELP PAGE

One Day Order Amounts:

Item	Amount	Considerations
MREs	1 Case per 3 People	7 Cases per Crew
Water	2.5 Gal per Person	10, 5 gallon Cubies per Crew
Batteries (AA)	1 Box Per 2 Radios	
Saw Fuel and Bar oil	1 Gal. Fuel, 2 Qt. Oil per 4 Hours	Specify Fuel Mix Ratio 50:1
Pump Fuel	1 Gal. Fuel per 1Hour Mark 3 pump 5 Gal. per 8 Hours	Specify Fuel Mix Ratio According to Pump Type, (pg. 95 IRPG)
Hose and Appliances	Figure 100' of 1" Laterals for every 200' of 1 ½" Trunk line and 50' of ¾ " Laterals for every 100' of 1"	Remember; Gated Wyes, Reducers, Nozzles, Hose clamps, Port-a-tanks, Etc...
Toilet Facilities, and Garbage Bags	1 Porta-Potty per 10 People for 40 Hours	Toilet Paper, Wash Stations. Lots of Garbage Bags.

Things to Keep In Mind

- Place Supply orders to Dispatch by 1000 hours to receive orders later that operational period.
- Place Supply Orders by 1600 hours to receive order the next operational shift.
- When ordering a Pump Kit, consider ordering 2 just in case there is a problem with one.
- Hot meals, dinners for that shift must be ordered by 1000 hours, meals for the next shift must be ordered by 1600 hours.
- Will you need a Fuel Truck?
- When ordering additional resources, Be Specific (i.e., Crew type, Engines with foam capabilities and type, Helicopter with bucket, etc...)
- Are there Resource concerns? (i.e., Watersheds, Archeology, Whirling Disease, etc...)
- When selecting a base camp/staging area, consider using private land as a last option. If that is the only option have a land-use agreement in place before occupancy.
- Is Base Camp sufficient for the incoming resources and logistical support?

NOTES