

Southeast Arizona Zone Incident Organizer



Obtain the following prior to responding to an incident

Descriptive Location:	
Command Freq:	
Tactical Freq:	
Air to Ground Freq:	
Air to Air Freq (as needed):	

Relay information to dispatch upon visual contact of the fire:

Descriptive Location or Legal:				
Incident Name:				
Estimated Size:	Small	Medium	Large	
Spread Potential:	Low	Moderate	High	
Values Threatened:	None	Structures	Others	Life



Complete the following before submitting:

Incident Name:	
Fire Number:	
Final Incident Commander:	
Fire Report Completion Date:	

The final IC is responsible for submitting the Incident Organizer and associated documentation to Tucson Dispatch or the AFMO where the incident occurred.

April 2019

TABLE OF CONTENTS

DOCUMENT	REQUIRED FOR:	PAGE
Initial Size-up_____	All Fires	3
Final Fire Report_____	All Fires	4
Wildfire Risk & Complexity Assessment _____	All Fires	5
Resource Summary_____	All Fires	11
Spot Weather Forecast_____	All Fires	12
Incident Action Plan		14
Incident Status Summary (ICS 209)		16
Incident After Action Review		22
SAFENET		23
Southeast Arizona Zone Frequencies		24
Southeast Arizona Zone Repeater Map		26
Southeast Arizona Zone Map		27
Zone Contacts		28
International Border Watchouts!		32
Justification For Excess Shifts		33
Unit Log		34
Fire Cause Determination Report		36
Medical Plan (ICS 206 WF)		39
Burn Injury Protocol _____	All Burn Injuries	43
Southeast Zone Delegation Of Authority		47
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p><i>Maps</i></p> </div> <div style="text-align: center;">  <p><i>Organizer</i></p> </div> </div>		

INITIAL SIZE-UP (Report to Tucson Dispatch)

FIRE NAME: _____ **TIME:** _____

ESTIMATED SIZE: _____ **INCIDENT COMMANDER:** _____

DESCRIPTIVE LOCATION: _____

LEGAL T: _____ **R:** _____ **S:** _____

COORDINATES LAT: _____ **LONG:** _____

ESTIMATED CONTAINMENT DATE: _____ **TIME:** _____

OWNERSHIP(S): _____

VALUES THREATENED: ☐ N ☐ Y Specify: _____

CONTROL PROBLEMS: ☐ N ☐ Y Specify: _____

ADDITIONAL RESOURCES: _____

SPREAD POTENTIAL: ☐ N ☐ Y Specify: _____

1-LOW 2-MODERATE 3-HIGH 4-EXTREME

WIND SPEED: _____

WIND DIRECTION:

1-NORTH	3-EAST	5-SOUTH	7-WEST
2-NORTHEAST	4-SOUTHEAST	6-SOUTHWEST	8-NORTHWEST

FIRE BEHAVIOR:

1-SMOLDERING	3-RUNNING	5-TORCHING	7-CROWNING/SPOT
2-CREEPING	4-SPOTTING	6-CROWNING	8-ERRATIC

FBPS FUEL MODEL:

TOPOGRAPHY (in vicinity of fire origin):

1-SHORT GRASS (1ft)	5-BRUSH (2 ft)	9-HARDWOOD LITTER
2-TIMBER W/GRASS	6-DORMANT BRUSH	10-TIMBER (LITTER/UNDERSTORY)
3-TALL GRASS	7-SOUTHERN ROUGH	11-LIGHT LOGGING SLASH
4-CHAPARRAL/BRUSH (6ft)	8-CLOSE TIMBER LITTER	12-MEDIUM LOGGING SLASH

1-RIDGETOP	4-MIDDLE 1/3 SLOPE	7-VALLEY BOTTOM
2-SADDLE	5-LOWER 1/3 SLOPE	8-MESA OR PLATEAU
3-UPPER 1/3 SLOPE	6-CANYON BOTTOM	9-FLAT OR ROLLING

SLOPE:

(percent Slope in vicinity of fire origin):

1 - 0-25%	2 - 26-40%	3 - 41-55%	4 - 76%
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CAUSE: Natural: _____ Human: _____

DECONFLICTION NEEDS: (Border Patrol/LE, Airspace, Railroad/Power lines, etc.) _____

SAFETY CHECKLIST

Address each question. If answer is NO, explain how risk will be mitigated.

L	Has the fire been scouted and lookouts posted?	YES	NO
C	Are communications adequate with dispatch and incident personnel?	YES	NO
E	Are escape routes identified and understood by all?	YES	NO
S	Are safety zones identified and understood by all incident personnel?	YES	NO

INCIDENT BRIEFING (ICS 201)

1. Incident Name:	2. Incident Number:	3. Date/Time Initiated: Date: _____ Time: _____
4. Map/Sketch (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, overflight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment): 		
5. Situation Summary and Health and Safety Briefing (for briefings or transfer of command): Recognize potential incident Health and Safety Hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards. 		
6. Prepared by: Name: _____ Position/Title: _____ Signature: _____		
ICS 201, Page 1		Date/Time: _____

RESOURCE SUMMARY

[illegible]

NOTES

[illegible]

INCIDENT ACTION PLAN		Incident Name	Number	Date Prepared	Time Prepared		
		Operational Period:					Date:
		Shift:		Day	Night		
*Objectives for the Incident							
1	SAFETY of firefighters and the public.						
2							
3							
4							
Weather Forecast for Operational Period							
BURN PERIOD	SKY COVER	TEMP	HUMIDITY	WIND <input type="checkbox"/> EYE LVL <input type="checkbox"/> 20 FT		HAINES INDEX	
				DIRECTION	VELOCITY		
Medical Plan							
HOSPITALS							
NAME	LOCATION	PHONE	HELIPAD		BURN CENTER		
			YES	NO	YES	NO	
Mt Graham Regional Medical Center ER	1600 S. 20th Ave Safford, AZ 85546 32° 49.00' / 109° 44.00'	928-348-4177	X			X	
North Cochise Community Hospital	901 W. Rex Allen Dr. Willcox, Az. 85643 32° 15.866' / 109° 50.284'	520-384-3541	X			X	
Tucson Medical Center	5301 E. Grant Road, Tucson, AZ 85712 32° 15.151' / 110° 52.690'	520-327-5461	X			X	
University Medical Center	1501 N. Campbell, Tucson, AZ 85724 32° 14.444' / 110° 56.773'	520-694-0111	X			X	
Arizona Burn Center at Maricopa Medical Center	2601 E. Roosevelt Street Phoenix, AZ 85008 33° 27.490' / 112° 01.588'	602-344-5726	X		X		
Canyon Vista Medical Center	5700 E. Highway 90 Sierra Vista, AZ 85635 31° 33.217' / 110° 13.800'	520-263-2000	X			X	
Santa Cruz Valley Hospital	4455 S. Interstate 19 Frontage Rd. Green Valley AZ 85614 31° 48.437' / 111° 0.574'	520-393-4700	X			X	
Holy Cross Hospital	1171 Target Range Rd. Nogales, AZ 85621 31° 20.440' / 110° 57.610'	520-285-3000	X			X	
Copper Queen Community Hospital	101 Cole Ave Bisbee, AZ 85603 31° 25.07' / 109° 52.95'	520-432-5383	X			X	
Oro Valley Hospital ER	1551 E. Tangerine RD Oro Valley, AZ 85755 32° 25.75' / 110° 56.86'	520-901-3510	X				
Benson Hospital ER	450 Ocotillo Ave Benson, AZ 85602 31° 58.07' / 110° 18.46'	520-586-2261	X			X	
Report all medical emergencies to line supervisor on a tactical channel. Route closest EMT to injured individuals. Do not transmit names of individuals over the radio. For all NON-MAJOR MEDICAL EMERGENCIES, conduct communications on a tactical channel; clear all traffic on the channel if necessary. Additional treatment and transportation requests will be radioed to the IC who will contact Tucson Dispatch Center. When reporting a medical emergency, relay the nature of the problem, number of injured, patient condition, location (GPS coordinates), and ETA to a transportation location. Requests for a helicopter medical transport (medevac) will be routed through the IC to Tucson Dispatch. On-scene EMT(s) and the IC will determine whether a ground ambulance or medevac is appropriate.							

ASSIGNMENT LIST (ICS 204)

1. Incident Name:		2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____		3. Branch: _____ Division: _____ Group: _____ Staging Area: _____	
4. Operations Personnel: Name _____ Contact Number(s) _____ Operations Section Chief: _____ Branch Director: _____ Division/Group Supervisor: _____					
5. Resources Assigned:		# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information	
Resource Identifier	Leader				
6. Work Assignments:					
7. Special Instructions:					
8. Communications (radio and/or phone contact numbers needed for this assignment):					
Name/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)				
/					
/					
/					
/					
9. Prepared by: Name: _____ Position/Title: _____ Signature: _____					
ICS 204	IAP Page _____	Date/Time: _____			

ASSIGNMENT LIST (ICS 204)

[illegible]

WILDLAND FIRE RISK AND COMPLEXITY ASSESSMENT

The Wildland Fire Risk and Complexity Assessment should be used to evaluate firefighter safety issues, assess risk, and identify the appropriate incident management organization. Determining incident complexity is a subjective process based on examining a combination of indicators or factors. An incident's complexity can change over time; incident managers should periodically re-evaluate incident complexity to ensure that the incident is managed properly with the right resources.

Instructions:

Incident Commanders should complete Part A and Part B and relay this information to the Agency Administrator. If the fire exceeds initial attack or will be managed to accomplish resource management objectives, Incident Commanders should also complete Part C and provide the information to the Agency Administrator.

Part A: Firefighter Safety Assessment

Evaluate the following items, mitigate as necessary, and note any concerns, mitigations, or other information:

Evaluate these items	Concerns, Mitigations, Notes
LCES	
Fire Orders and Watch Out Situations	
Multiple operational periods have occurred without achieving initial objectives	
Incident personnel are overextended mentally and/or physically and are affected by cumulative fatigue.	
Communication is ineffective with tactical resources and/or dispatch.	
Operations are at the limit of span of control.	
Aviation operations are complex and/or aviation oversight is lacking.	
Logistical support for the incident is inadequate or difficult.	

WILDLAND FIRE RISK AND COMPLEXITY ASSESSMENT Part B: Relative Risk Assessment

Values				Notes/Mitigation
<u>B1. Infrastructure/Natural/Cultural Concerns</u> Based on the number and kinds of values to be protected, and the difficulty to protect them, rank this element low, moderate, or high. Considerations: key resources potentially affected by the fire such as urban interface, structures, critical municipal watershed, commercial timber, developments, recreational facilities, power/pipelines, communication sites, highways, potential for evacuation, unique natural resources, designated areas (i.e. wilderness), T&E species habitat, and cultural sites.	L	M	H	
<u>B2. Proximity and Threat of Fire to Values</u> Evaluate the potential threat to values based on their proximity to the fire, and rank this element low, moderate, or high.	L Far	M	H Near	
<u>B3. Social/Economic Concerns</u> Evaluate the potential impacts of the fire to social and/or economic concerns, and rank this element low, moderate, or high. Considerations: impacts to social or economic concerns of an individual, business, community or other stakeholder; degree of support for the wildland fire program and resulting fire effects; other fire management jurisdictions; tribal subsistence or gathering of natural resources; air quality regulatory requirements; public tolerance of smoke, including health impacts; potential for evacuation and ingress/egress routes; and restrictions and/or closures in effect or being considered.	L	M	H	
Hazards				Notes/Mitigation
<u>B4. Fuel Conditions</u> Consider fuel conditions ahead of the fire and rank this element low, moderate, or high. Evaluate fuel conditions that exhibit high ROS and intensity for your area, such as those caused by invasive species or insect/disease outbreaks; and/or continuity of fuels.	L	M	H	
<u>B5. Fire Behavior</u> Evaluate the current and expected fire behavior and rank this element low, moderate, or high. Considerations: intensity; rates of spread; crowning; profuse or long-range spotting.	L	M	H	
<u>B6. Potential Fire Growth</u> Evaluate the potential fire growth, and rank this element low, moderate, or high. Considerations: Considerations would include current and expected fire growth based on fire behavior analysis and the weather forecast and/or the ability to control the fire.	L	M	H	
Probability				Notes/Mitigation
<u>B7. Time of Season</u> Evaluate the potential for a long-duration fire and rank this element low, moderate, or high. Considerations: time remaining until a season ending event.	L Late	M Mid	H Early	
<u>B8. Barriers to Fire Spread</u> Evaluate the barriers to fire spread and their potential to limit fire growth, and rank this element low, moderate, or high. Considerations: If many natural and/or human-made barriers are present, rank this element low. If some barriers are present, rank this element moderate. If no barriers are present, rank this element high.	L Many	M	H Few	
<u>B9. Seasonal Severity</u> Evaluate fire danger indices and rank this element low/moderate, high, or very high/extreme. Considerations: Fire danger indices such as energy release component (ERC); drought status; live and dead fuel moistures; fire danger indices; adjective fire danger rating; geographic area preparedness level.	L/M	H	VH/E	
Enter the number of items circled for each column.				
Relative Risk Rating				Notes/Mitigation
Circle the Relative Risk Rating (from Part B).	L	M	H	

WILDLAND FIRE RISK AND COMPLEXITY ASSESSMENT Part C: Organization

ImplementationDifficulty					Notes/Mitigation
<u>C1. Potential Fire Duration</u> Evaluate the estimated length of time that the fire may continue to burn if no action is taken and amount of season remaining. Rank this element low, moderate, or high. Note: This will vary by geographic area.	N/A Very Short	L Short	M	H Long	
<u>C2. Incident Strategies (Course of Action)</u> Evaluate the level of firefighter and aviation exposure required to successfully meet the current strategy and implement the course of action. Rank this element as very low, low, moderate, or high. Consider the likelihood that those resources will be effective; exposure of firefighters; reliance on aircraft to accomplish objectives; and whether there are clearly defined trigger points.	Very Low	L	M	H	
<u>C3. Functional Concerns</u> Evaluate the need to increase organizational structure to adequately and safely manage the incident, and rank this element very low (minimal resources committed), low (adequate), moderate (some additional support needed), or high (current capability inadequate). Considerations: Incident management functions (logistics, finance, operations, information, planning, safety, and/or specialized personnel/equipment) are inadequate and needed; availability of resources; access to EMS support; heavy commitment of local resources to logistical support; ability of local businesses to sustain logistical support; substantial air operation which is not properly staffed; worked multiple operational periods without achieving initial objectives; incident personnel overextended mentally and/or physically; Incident Action Plans, briefings, etc. missing or incomplete; performance of firefighting resources affected by cumulative fatigue; and ineffective communications.	Very Low	L	M	H	
Socio/PoliticalConcerns					Notes/Mitigation
<u>C4. Objective Concerns</u> Evaluate the complexity of the incident objectives and rank this element very low, low, moderate, or high. Considerations: clarity; ability of current organization to accomplish; disagreement among cooperators; tactical/operational restrictions; complex objectives involving multiple focuses; objectives influenced by serious accidents or fatalities.	Very Low	L	M	H	
<u>C5. External Influences</u> Evaluate the effect external influences will have on how the fire is managed and rank this element very low, low, moderate, or high. Considerations: limited local resources available for initial attack; increasing media involvement, social/print/television media interest; controversial fire policy; threat to safety of visitors from fire and related operations; restrictions and/or closures in effect or being considered; pre-existing controversies/relationships; smoke management problems; sensitive political concerns/interests.	Very Low	L	M	H	
<u>C6. Ownership Concerns</u> Evaluate the effect ownership/jurisdiction will have on how the fire is managed and rank this element very low, low, moderate, or high. Considerations: disagreements over policy, responsibility, and/or management response; fire burning or threatening more than one jurisdiction; potential for unified command; different or conflicting management objectives; potential for claims (damages); disputes over suppression responsibility.	Very Low	L	M	H	
Enter the number of items circled for each column					

Recommended Organization (circle one):

Type 5	Majority of items rated as "N/A"; a few items may be rated in other categories.
Type 4	Majority of items rated as "Low", with some items rated as "N/A", and a few items rated as "Moderate" or "High".
Type 3	Majority of items rated as "Moderate", with a few items rated in other categories.
Type 2	Majority of items rated as "Moderate", with a few items rated as "High".
Type 1	Majority of items rated as "High"; a few items may be rated in other categories.

Rationale:

Use this section to document the incident management organization for the fire. If the incident management organization is different than the Wildland Fire Risk and Complexity Assessment

Name of Incident: _____ Units: _____

Date: _____ Time: _____

Signature of Preparer: _____

INDICATORS OF INCIDENT COMPLEXITY

Common indicators may include the area (location) involved; threat to life, environment and property; political sensitivity, organizational complexity, jurisdictional boundaries, values at risk, and weather. Most indicators are common to all incidents, but some may be unique to a particular type of incident. The following are common contributing indicators for each of the five complexity types.

TYPE 5 INCIDENT COMPLEXITY INDICATORS

General Indicators	Span of Control Indicators
<p>Incident is typically terminated or concluded (objective met) within a short time once resources arrive on scene</p> <p>For incidents managed for resource objectives, minimal staffing/oversight is required</p> <p>One to five single resources may be needed</p> <p>Formal Incident Planning Process not needed</p> <p>Written Incident Action Plan (IAP) not needed</p> <p>Minimal effects to population immediately surrounding the incident</p> <p>Critical Infrastructure, or Key Resources, not adversely affected</p>	<p>Incident Commander (IC) position filled</p> <p>Single resources are directly supervised by the IC</p> <p>Command Staff or General Staff positions not needed to reduce workload or span of control</p>

TYPE 4 INCIDENT COMPLEXITY INDICATORS

General Indicators	Span of Control Indicators
<p>Incident objectives are typically met within one operational period once resources arrive on scene, but resources may remain on scene for multiple operational periods</p> <p>Multiple resources (over 6) may be needed</p> <p>Resources may require limited logistical support</p> <p>Formal Incident Planning Process not needed</p> <p>Written Incident Action Plan (IAP) not needed</p> <p>Limited effects to population surrounding incident</p> <p>Critical Infrastructure or Key Resources may be adversely affected, but mitigation measures are uncomplicated and can be implemented within one Operational Period</p> <p>Elected and appointed governing officials, stakeholder groups, and political organizations require little or no interaction.</p>	<p>IC role filled</p> <p>Resources either directly supervised by the IC or supervised through an ICS Leader position</p> <p>Task Forces or Strike Teams may be used to reduce span of control to an acceptable level</p> <p>Command Staff positions may be filled to reduce workload or span of control</p> <p>General Staff position(s) may be filled to reduce workload or span of control</p>

TYPE 3 INCIDENT COMPLEXITY INDICATORS

General Indicators	Span of Control Indicators
<p>Incident typically extends into multiple operational periods</p> <p>Incident objectives usually not met within the first or second operational period</p> <p>Resources may need to remain at scene for multiple operational periods, requiring logistical support</p> <p>Numerous kinds and types of resources may be required</p> <p>Formal Incident Planning Process is initiated and followed</p> <p>Written Incident Action Plan (IAP) needed for each Operational Period</p> <p>Responders may range up to 200 total personnel</p> <p>Incident may require an Incident Base to provide support</p> <p>Population surrounding incident affected</p> <p>Critical Infrastructure or Key Resources may be adversely affected and actions to mitigate effects may extend into multiple Operational Periods</p> <p>Elected and appointed governing officials, stakeholder groups, and political organizations require some level of interaction</p>	<p>IC role filled</p> <p>Numerous resources supervised indirectly through the establishment and expansion of the Operations Section and its subordinate positions</p> <p>Division Supervisors, Group Supervisors, Task Forces, and Strike Teams used to reduce span of control to an acceptable level</p> <p>Command Staff positions filled to reduce workload or span of control</p> <p>General Staff position(s) filled to reduce workload or span of control</p> <p>ICS functional units may need to be filled to reduce workload</p>

INDICATORS OF INCIDENT COMPLEXITY

TYPE 2 INCIDENT COMPLEXITY INDICATORS

General Indicators	Span of Control Indicators
<p>Incident displays moderate resistance to stabilization or mitigation and will extend into multiple operational periods covering several days</p> <p>Incident objectives usually not met within the first several Operational Periods Resources may need to remain at scene for up to 7 days and require complete logistical support</p> <p>Numerous kinds and types of resources may be required including many that will trigger a formal demobilization process</p> <p>Formal Incident Planning Process is initiated and followed</p> <p>Written Incident Action Plan (IAP) needed for each Operational Period</p> <p>Responders may range from 200 to 500 total</p> <p>Incident requires an Incident Base and several other ICS facilities to provide support population surrounding general incident area affected</p> <p>Critical Infrastructure or Key Resources may be adversely affected, or possibly destroyed, and actions to mitigate effects may extend into multiple Operational Periods and require considerable coordination</p> <p>Elected and appointed governing officials, stakeholder groups, and political organizations require a moderate level of interaction</p>	<p>IC role filled</p> <p>Large numbers of resources supervised indirectly through the expansion of the Operations Section and its subordinate positions</p> <p>Branch Director position(s) may be filled for organizational or span of control purposes</p> <p>Division Supervisors, Group Supervisors, Task Forces, and Strike Teams used to reduce span of control</p> <p>All Command Staff positions filled All General Staff positions filled</p> <p>Most ICS functional units filled to reduce workload</p>

TYPE 1 INCIDENT COMPLEXITY INDICATORS

General Indicators	Span of Control Indicators
<p>Incident displays high resistance to stabilization or mitigation and will extend into numerous operational periods covering several days to several weeks</p> <p>Incident objectives usually not met within the first several Operational Periods Resources may need to remain at scene for up to 14 days, require complete logistical support, and several possible personnel replacements</p> <p>Numerous kinds and types of resources may be required, including many that will trigger a formal demobilization process</p> <p>DOD assets, or other nontraditional agencies, may be involved in the response, requiring close coordination and support</p> <p>Complex aviation operations involving multiple aircraft may be involved Formal Incident Planning Process is initiated and followed.</p> <p>Written Incident Action Plan (IAP) needed for each Operational Period Responders may range from 500 to several thousand total</p> <p>Incident requires an Incident Base and numerous other ICS facilities to provide support .</p> <p>Population surrounding the region or state where the incident occurred is affected Numerous Critical Infrastructure or Key Resources adversely affected or destroyed.</p> <p>Actions to mitigate effects will extend into multiple Operational Periods spanning days or weeks and require long-term planning and considerable coordination.</p> <p>Elected and appointed governing officials, stakeholder groups, and political organizations require a high level of interaction</p>	<p>IC role filled</p> <p>Large numbers of resources supervised indirectly through the expansion of the Operations Section and its subordinate positions</p> <p>Branch Director position(s) may be filled for organizational or span of control purposes</p> <p>Division Supervisors, Group Supervisors, Task Forces, and Strike Teams used to reduce span of control</p> <p>All Command Staff positions filled and many include assistants</p> <p>All General Staff positions filled and many include deputy positions</p> <p>Most or all ICS functional units filled to reduce workload</p>

SPOT WEATHER FORECAST REQUEST									
REQUIRED INFORMATION *									
PROJECT					AGENCY				
*Project Name: Wildfire WFU HAZMAT RX Fire <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> SAR <u>Date:</u> <u>Ignition Time:</u> <input type="checkbox"/>					*Requesting Agency: *Requesting Official: *Phone: FAX: Contact Person:				
REASON FOR SPOT FORECAST REQUEST									
<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Wildfire <input type="checkbox"/> Non-wildfire </div> <p style="text-align: center; font-size: small;">*Must choose one</p>									
LOCATION						FUEL			
*LAT: _____ *LONG: _____ 7.5' QUAD: _____ Legal (T/R): T _____ R _____ S _____ Size (acres): _____						<div style="display: flex;"> <div style="flex: 1;"> <div style="display: flex; justify-content: space-between; font-size: small;"> Top Bottom </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> *Elevation: <input style="width: 80%;" type="text"/> Drainage: <input style="width: 80%;" type="text"/> *Aspect: <input style="width: 80%;" type="text"/> </div> <div style="width: 5%; text-align: center;"> <input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/> </div> </div> </div> <div style="flex: 1; padding-left: 10px;"> Type: _____ Sheltering Full Partial Unsheltered </div> </div>			
OBSERVATIONS									
Place	Elev.	Time	Wind	Temp	Wetbulb	RH	Dew Pt.	Sky/Weather	
PRIMARY FORECAST ELEMENTS						REMARKS			
TODAY	TONIGHT	TOMORROW	<div style="display: flex;"> <div style="flex: 1;"> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> </div> <div style="flex: 1; padding-left: 5px;"> LAL Haines Index Clearing Index Sky/Weather Temperature Humidity Wind-20 foot </div> </div>			<div style="height: 150px;"></div>			

FINAL FIRE REPORT INFORMATION (used to complete agency specific Fire Reports)

Discovery Date & Time M:____D:____YR:____TIME:____

Initial Attack Date & Time M:____D:____YR:____TIME:____

Containment Date & Time M:____D:____YR:____TIME:____

Control Date & Time M:____D:____YR:____TIME:____

Out Date & Time M:____D:____YR:____TIME:____

Total Acres: _____

BLM Acres: _____ **USFS Acres:** _____ **State Acres:** _____

County & Private Acres: _____

Other Acres (specify): _____

NFRDS outputs on start date: _____

Acres at time of Discovery: _____ **Acres at time of IA:** _____

Lat & Long (NAD83) at Origin LAT: _____ LONG: _____

UTM (NAD 83) Z E _____ **N** _____

Fire Cause: _____

Topography: _____

Aspect at Origin (circle one): NW N NE E SE S SW W

Slope at Origin: _____

High Elevation: _____

Low Elevation: _____

Name of closest RAWS: _____

Fuel Description: _____

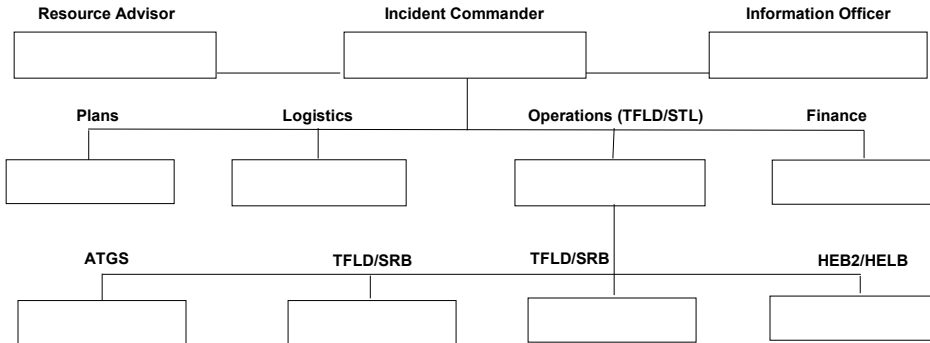
Remarks:

Fire Weather Forecaster will furnish the following:					
Discussion Outlook:			Date and Time:		
Burn Period	Today (Sunrise to Dusk)	This Afternoon (Noon To Dusk)	This Evening (1600 to Dusk)	Tonight (Sunset to Sunrise)	
Sky Cover	Temperatures	Humidity	Eye-Level Wind	20-Foot Wind	Indices
Mostly Sunny/Clear Fair Partly Cloudy Mostly Cloudy Cloudy Variable Clouds	____ F High Low Range	____ % Minimum Maximum Range	Upslope Down Slope Direction: Velocity: ____ mph Gusts: ____ mph	Upslope Down Slope Direction: Velocity: ____ mph Gusts: ____ mph	Haines: LAL: BI: Clearing Index:
Burn Period	Today (Sunrise to Dusk)	This Afternoon (Noon To Dusk)	This Evening (1600 to Dusk)	Tonight (Sunset to Sunrise)	
Sky Cover	Temperatures	Humidity	Eye-Level Wind	20-Foot Wind	Indices
Mostly Sunny/Clear Fair Partly Cloudy Mostly Cloudy Cloudy Variable Clouds	____ F High Low Range	____ % Minimum Maximum Range	Upslope Down Slope Direction: Velocity: ____ mph Gusts: ____ mph	Upslope Down Slope Direction: Velocity: ____ mph Gusts: ____ mph	Haines: LAL: BI: Clearing Index:
Burn Period	Outlook for (Date):				
Sky Cover	Temperatures	Humidity	Eye-Level Wind	20-Foot Wind	Indices
Mostly Sunny/Clear Fair Partly Cloudy Mostly Cloudy Cloudy Variable Clouds	____ F High Low Range	____ % Minimum Maximum Range	Upslope Down Slope Direction: Velocity: ____ mph Gusts: ____ mph	Upslope Down Slope 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:					

INCIDENT ACTION PLAN GENERAL SAFETY MESSAGE

INCIDENT STATUS SUMMARY (ICS 209)

Incident Name:	Incident Number:	Date:	Start Time: End Time:
Current Organization			

[illegible]

INCIDENT STATUS SUMMARY (ICS 209)

*1. Incident Name:		2. Incident Number:	
*3. Report Version (check one box on left): <input type="checkbox"/> Initial <input type="checkbox"/> Update <input type="checkbox"/> Final		*4. Incident Commander(s) & Agency or Organization: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 7. Current Incident Size or Area Involved (use unit label – e.g., "sq mi," "city block"): </div> <div style="width: 45%;"> 8. Percent (%) Contained or Completed (circle one): </div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> *5. Incident Management Organization: </div> <div style="width: 45%;"> *6. Incident Start Date/Time: Date: _____ Time: _____ Time Zone: _____ </div> </div>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> *9. Incident Definition: </div> <div style="width: 45%;"> 10. Incident Complexity Level: </div> </div>			
*11. For Time Period: From Date/Time: _____ To Date/Time: _____			

Approval & Routing Information

*12. Prepared By: Print Name: _____ ICS Position: _____ Date/Time Prepared: _____	*13. Date/Time Submitted: Time Zone: _____
*14. Approved By: Print Name: _____ ICS Position: _____ Signature: _____	*15. Primary Location, Organization, or Agency Sent To:

Incident Location Information

*16. State:	*17. County/Parish/Borough:	*18. City:	
19. Unit or Other:	*20. Incident Jurisdiction:	21. Incident Location Ownership (if different than jurisdiction):	
22. Longitude (indicate format): Latitude (indicate format):	23. US National Grid Reference:	24. Legal Description (township, section, range):	
*25. Short Location or Area Description (list all affected areas or a reference point)		26. UTM Coordinates: _____ R	X-east Y-north
27. Note any electronic geospatial data included or attached (indicate data format, content, and collection time information and labels):			

Incident Summary

28. Observed Fire Behavior or Significant Events for the Time Period Reported (describe fire behavior using accepted terminology). For non-fire incidents describe significant events related to the materials or other causal agents:
29. Primary Materials or Hazards Involved (hazardous chemicals, fuel types, infectious agents, radiation, etc):

INCIDENT STATUS SUMMARY (ICS 209)

30. Damage Assessment Information (summarize damage and/or restriction of use or availability to residential or commercial property, natural resources, critical infrastructure and key resources, etc.):	A. Structural Summary	B. # Threatened (72 hrs)	C. # Damaged	D. # Destroyed
	E. Single Residences			
	F. Nonresidential Commercial Property			
	G. Other Minor Structures			

Additional Incident Decision Support Information

*31. Public Status Summary:	A. # This Reporting Period	B. Total # to Date	*32. Responder Status Summary:	A. # This Reporting Period	B. Total # to Date		
<i>C. Indicate Number of Civilians (Public) Below:</i>			<i>C. Indicate Number of Responders Below:</i>				
D. Fatalities			D. Fatalities				
E. With Injuries/Illness			E. With Injuries/Illness				
F. Trapped/In Need of Rescue			F. Trapped/In Need of Rescue				
G. Missing (note if estimated)			G. Missing				
H. Evacuated (note if estimated)			H.				
I. Sheltering in Place (note if estimated)			I. Sheltering in Place				
J. In Temporary Shelters (note if est.)			J.				
K. Have Received Mass Immunizations			K. Have Received Immunizations				
L. Require Immunizations (note if est.)			L. Require Immunizations				
M. In Quarantine			M. In Quarantine				
N. Total # Civilians (Public) Affected:			N. Total # Responders Affected:				
33. Life, Safety, and Health Status/Threat Remarks:			*34. Life, Safety, and Health Threat Management:				
			A. Check (if Active)			B. Notes	
			C. No Likely Threat				
			D. Potential Future Threat				
			E. Mass Notifications in Progress				
			F. Mass Notifications Completed				
			G. No Evacuation(s) Imminent				
			H. Planning for Evacuation				
			I. Planning for Shelter-in-Place				
35. Weather Concerns (synopsis of current and predicted weather; discuss related factors that may cause concern):			J. Evacuation(s) in Progress				
			K. Shelter-in-Place in Progress				
			L. Repopulation in Progress				
			M. Mass Immunization in Progress				

INCIDENT STATUS SUMMARY (ICS 209)

	N. Mass Immunization Complete		
	O. Quarantine in Progress		
	P. Area Restriction in Effect		

36. Projected Incident Activity, Potential, Movement, Escalation, or Spread and influencing factors during the next operational period and in 12-, 24-, 48-, and 72-hour timeframes:

12 hours:

24 hours:

48 hours:

72 hours:

Anticipated after 72 hours:

37. Strategic Objectives (define planned end-state for incident):

38. Current Incident Threat Summary and Risk Information in 12, 24, 48, and 72-hour timeframes and beyond. Summarize primary incident threats to life, property, communities and community stability, residences, health care facilities, other critical infrastructure and key resources, commercial facilities, natural and environmental resources, cultural resources, and continuity of operations and/or business. Identify corresponding incident-related potential economic or cascading impacts.

12 hours:

24 hours:

48 hours:

72 hours:

Anticipated after 72 hours:

39. Critical Resource Needs in 12, 24, 48, and 72-hour timeframes and beyond to meet critical incident objectives. List resource category, kind, and/or type, and amount needed, in priority order:

12 hours:

24 hours:

48 hours:

72 hours:

Anticipated after 72 hours:

40. Strategic Discussion: Explain the relation of overall strategy, constraints, and current available information to:

critical resource needs identified above,

the Incident Action Plan and management objectives and targets,

anticipated results.

Explain major problems and concerns such as operational challenges, incident management problems, and social, political, economic, or environmental concerns or impacts.

INCIDENT STATUS SUMMARY (ICS 209)

41. Planned Actions for Next Operational Period:
42. Projected Final Incident Size/Area (use unit label – e.g., "sq mi"):
43. Anticipated Incident Management Completion Date:
44. Projected Significant Resource Demobilization Start Date:
45. Estimated Incident Costs to Date:
46. Projected Final Incident Cost Estimate:
47. Remarks (or continuation of any blocks above – list block number in notation):

INCIDENT STATUS SUMMARY (ICS 209)

48. Agency or Organization:	49. Resources (summarize resources by category, kind, and/or type; show # of resources on top ½ of box, show # of personnel associated with resource on bottom ½ of box):	50. # of Personnel not assigned to a resource:	51. Total Personnel (includes those associated with resources – e.g., aircraft or engines –and individual overhead):
52. Total Resources			
53. Additional Cooperating and Assisting Organizations Not Listed Above:			

SOUTHEAST ARIZONA ZONE FREQUENCIES

NAME	RX Freq	RX Tone	TX Freq	TX Tone	BW
Coronado National Forest (CNF)					
AZ-CNF Admin Simplex	171.6375		171.6375		N
AZ-CNF Admin Repeater	171.6375		162.6000		N
AZ-CNF Fire Net Simplex	172.2750		172.2750		N
AZ-CNF Fire Net Repeater	172.2750		168.1500		N
West Peak				100.0	N
Mule Mountain				103.5	N
Atascosa / Antelope				107.2	N
Bigelow				110.9	N
Hopkins				114.8	N
Heliograph				118.8	N
Red Mountain				123.0	N
Mt. Lemmon				127.3	N
Monte Vista				131.8	N
TAC1	167.5500		167.5500		N
TAC2	168.6750		168.6750		N
TAC3	168.7750		168.7750		N
10) Portable Rptr 1	168.150		172.275	141.3	N
11) Portable Rptr 2	168.150		172.275	156.7	N
Tohono O'Odham (TOT)					
Tohono O'Odham (Simplex)	169.625		169.625		N
Kitt Peak Repeater	169.625	167.9	164.675	167.9	N
Saguaro National Park (SAP)					
Saguaro NP Repeater	171.1625		164.7750		N
Wasson		NAC 1111		NAC 1111	N
Keystone		NAC 2111		NAC 2111	N
Mt. Lemmon		NAC 3111		NAC 3111	N
Mica		NAC 4111		NAC 4111	N
Chiricahua National Monument (CHP)					
Chiricahua NM (Simplex)	171.725		171.725		N
CHP Repeater (Sugarloaf)	171.725	110.9	172.525	156.7	N
Buenos Aires FWS (BAR)					
Buenos Aires (Simplex)	164.625		164.625		D
BAR Repeater (Arivaca Peak)	164.625	NAC 0257	163.150	NAC 0257	D

SOUTHEAST ARIZONA ZONE FREQUENCIES

NAME	RX Freq	RX Tone	TX Freq	TX Tone	BW
Safford BLM (SAD)					
Heliograph	173.8250		166.3125	114.8	N
Guthrie	173.8250		166.3125	136.5	N
Mule (aka Juniper)	173.8250		166.3125	131.8	N
Lemmon	173.8250		166.3125	123.0	N
Pinal Peak	173.8250		166.3125	146.2	N
West Peak	173.8250		166.3125	107.2	N
Keystone	173.8250		166.3125	162.2	N
Fire TAC 1	168.275		168.275		N
Fire TAC 2	170.025		170.025		N
Portable Repeater	168.3500		163.1000	162.2	N
Arizona Department of Forestry and Fire Management (AZDFFM)					
AZ State Towers	151.400	162.2	159.405	162.2	N
AZ State Lemmon	151.415	123.0	159.435	123.0	N
AZ State Mule	151.415	162.2	159.435	162.2	N
AZ State Heliograph	151.400	123.0	159.405	123.0	N
AZ State Nogales Peak	154.860	114.8	153.875	103.5	N
VFIRE 21 (aka Mutual Aid)	154.280		154.280		N
AZ State Flight Follow	154.935		154.935	110.9	N
ADF MTAC1	159.330	110.9	159.330	110.9	N
ADF MTAC2	159.450	192.8	159.450	192.8	N
ADF MTAC3 (State Crews)	159.240	103.5	159.240	103.5	N
ADF MTAC4	159.285	151.4	159.285	151.4	N
Arizona Game and Fish					
Arizona G & F	151.460		151.460		
Southeast Zone A/A and A/G					
Zone Wide A/A	135.625		135.625		
Zone Wide A/A	126.975		126.975		
Zone Wide A/A (Apr-Sept)	125.325		125.325		
Zone Wide A/G 41	167.4750		167.4750		
Zone Wide A/G 56	168.6625		168.6625		
Zone Wide A/G 32	166.9625		166.9625		
National Frequencies					
National Public Helicopters When flying near the U.S.- Mexico border aircraft may be able to contact CBP helicopters on this frequency.	123.025		123.025		
RAMP--FHU & Safford Bases	123.975		123.975		
National Flight Following	168.650	110.9	168.650	110.9	N
Air Guard	168.625	110.9	168.625	110.9	N
VMED 28	155.340		155.340	156.7	N
VMED 29	155.3475		155.3475	156.7	N

Some agencies co-locate their agency repeaters on the same mountain tops.



SOUTHEAST ARIZONA ZONE BOUNDARY MAP



29 Southeast Arizona Zone extends: Casa Grande, AZ south to the U.S.—Mexico border, and from east of Yuma, AZ to the Arizona—New Mexico border.

CONTACTS

Coronado National Forest				
Position	Call-Sign	Name	Work	Cell
FMO	Chief 5	Steve Miranda	520-202-2701	520-268-5061
AFMO	Chief 51	John Manthei	520-202-2702	520-528-2182
UAO	Aviation 5	Sean Cox	520-202-2703	530-409-2363
Douglas Ranger District (D1)				
Douglas Dist. Ranger	Ranger 51	Doug Ruppel	520-364-6811	520-268-0045
Douglas Dist. FMO	Division 51	Renee Kuehner	520-364-4844	520-368-4591
Douglas Dist. AFMO	Battalion 51	Dan Gleason	520-364-6831	509-322-1583
Captain E-511	Captain 511	Tim Ross	520-364-6835	970-846-7628
Assistant E-511	Engineer 511	Kreg Jackson		936-240-2208
Superintendent H-318	Superintendent 318	Travis Stanfill		541-390-1792
Asst. Crew Supv. H-318	Captain 318	Matt Feeley		785-317-4431
Captain E-512	Captain 512	Juan Corella		605-639-9379
Assistant E-512	Engineer 512	JD Hill		208-351-0871
Prevention/Patrol	Patrol 511	Dave Soto		520-991-7903
Prevention/Patrol	Patrol 512	Vacant		
Nogales Ranger District (D2)				
Nogales Dist. Ranger	Ranger 52	Jim Copeland	520-761-6002	520-334-0034
Nogales Dist. FMO	Division 52	Darrel Howell	520-761-6018	520-559-0746
Nogales Dist. AFMO	Battalion 52	Ian Morgan	520-761-6018	575-937-7262
Captain E-622	Captain 622	Mike Grambs	520-761-6011	520-490-3642
Assistant E-622	Engineer 622	Jeff Fulgham	520-761-6007	603-986-4618
Captain E-621	Captain 621	Jorge Amaya	520-313-1500	520-444-3477
Assistant E-621	Engineer 621	Jesus Bonicichi	520-234-0729	303-330-4279
Prevention/Patrol	Patrol 521		520-988-0672	
Safford Ranger District (D4)				
Safford Dist. Ranger	Ranger 54	Curtis Booher	928-348-1974	928-428-2393
Safford Dist. FMO	Division 54	Everett Phillips	928-428-3692	928-719-1595
Safford Dist. AFMO	Battalion 54	Scott Glaspie	928-348-1970	520-490-9518
Captain E-641	Captain 641	Dane Ostler	928-428-4157	928-322-9073
Assistant E-641	Engineer 641	John Fitzgerald	928-428-4157	928-322-2141
Captain E-642	Captain 642	Jimmy Nichols	928-428-4157	520-237-3405
Assistant E-642	Engineer 642	Bernie Romero		928-651-1288
Prevention/Patrol	Patrol 543	Eliot Pickett		928-699-5835

CONTACTS

Coronado National Forest				
Position	Call-Sign	Name	Work	Cell
Sierra Vista Ranger District (D3)				
Sierra Vista Dist. Ranger	Ranger 53	Daisy Kinsey	520-803-2805	520-237-4888
Sierra Vista Dist. FMO	Division 53	Jason McClain	520-803-2832	520-678-2808
Sierra Vista Dist. AFMO	Battalion 53	Vacant	520-803-2838	
SV Dist Fuels AFMO	Fuels 53	Beau Cartwright	520-803-2816	970-846-7628
Captain E-631	Captain 631	Jason Mcdade	520-803-0311	928-451-2662
Assistant E-631	Engineer 631	Freddie Taveres	520-378-0311	520-234-7920
Captain E-632	Captain 632	Mike Epperson	520-378-0311	575-732-0843
Assistant E-632	Engineer 632	Justin Holzman	520-378-0311	520-732-0843
Captain E-331	Captain 331	Bethany Kurtz	520-378-0311	406-459-2750
Assistant E-331	Engineer 331	Kyle Lehman	520-388-0311	520-433-1154
Prevention/Patrol	Patrol 531	Rebecca Hodgeson	520-803-2818	520-456-6837
Prevention/Patrol	Patrol 532	Jessica Silverwind	520-803-2818	520-305-2534
Santa Catalina Ranger District (D5)				
Catalina Dist. Ranger	Ranger 55	CJ Woodard	520-760-2306	
Catalina Dist. FMO	Division 55	Ben Plumb	520-749-7708	928-699-4256
Catalina Dist. AFMO	Battalion 55	Steve Grater	520-749-7708	520-668-4954
Captain E-551	Captain 551	Seth Odell	520-760-2504	
Assistant E-551	Engineer 551	Len Palakiko	520-760-2504	360-624-8144
Captain E-652	Captain 652	Steve Holley	520-760-2310	520-310-2800
Assistant E-652	Engineer 652	Nevin Shirkey	520-760-2310	520-332-0883
Superintendent H-320	Superintendent 320	Luke Abell	520-664-0600	808-345-6979
Captain H-320	Captain 3201	Justin Maloney	520-664-0600	520-404-4464
Captain H-320	Captain 3202	Bob Schmidt	520-664-0600	520-975-8923
Prevention/Patrol	Patrol 551	Kevin Lillie	520-760-2503	520-664-7818
Prevention/Patrol	Patrol 552	Felicia Sunanto	520-760-2503	520-312-1523
Prevention/Patrol	Patrol 553	Vacant	520-760-2503	
Supervisor's Office				
Coronado NF Fuels Spec.	Chief 52	Chris Stetson	520-388-8360	520-307-8690

CONTACTS

Gila District BLM				
Position	Call-Sign	Name	Work	Cell
FMO	Chief 4100	Damon McRae	928-348-4508	928-651-4480
AFMO	Chief 4101	Lathe Evans	928-348-4514	928-651-4477
Unit Aviation Officer		Vacant	928-348-4503	
Sierra Vista				
EML E-4337	Captain 4337	Mike Gustafson	520-439-6403	520-909-4664
Assistant E-4337	Engineer 4337	Fernando Quiroga	520-439-6403	520-604-0280
Senior Fire Fighter		Vacant	520-439-6414	
Aravaipa Crew Superintendent		Greg Smith		480-392-0543
Aravaipa Crew Assistant	Aravaipa 2	Wade Irish		520-678-9518
Aravaipa Crew Assistant	Aravaipa 1	Ryan Haggenah		520-678-9517
Safford				
EML E-4664	Captain 4664	Kress Sanders	928-348-4424	928-298-1018
EML E-4665	Captain 4665	Clyde England	928-348-4521	928-235-0623
Assistant E-4664	Engineer 4664	Michael McCoy	928-348-4424	
Assistant E-4665	Engineer 4665	Nick Bazo		928-228-1470
Fuels Specialist	Division 4111	Dan Quintana	928-348-4525	928-651-4470
Fire Mgt. Spec.	Division 4112	John Garrett	928-348-4416	
Fleet Manager		Rocky Bernal	928-348-4504	520-237-3342
Incident Business		Sue Goodman	928-348-4545	928-651-4475
Tucson				
Fire Mitigation Spec.	Patrol 4120	Drew Atkinson	520-258-7240	928-961-4649

Saguaro National Park NPS				
Position	Call-Sign	Name	Work	Cell
Deputy Interagency FMO		John Thornburg	520-733-5130	520-269-3906
FMO	Division 55	Ben Plump	520-749-7708	928-699-4265
UAO	Aviation 5	Sean Cox	520-202-2703	530-409-2363
Fire Ops Specialist	Battalion 55	Steve Grater	520-733-5165	520-245-9105
Fire Mgt. Spec.	Saguaro	Jason Thivner	520-733-5133	520-405-4597
Asst WFM Leader	Saguaro 2	Jay Yanick	520-733-5167	520-405-4647

CONTACTS

Buenos Aires Fish & Wildlife Service				
Position	Call-Sign	Name	Work	Cell
FMO		Nathan Barrett	520-832-4292 x101	520-678-2808
AFMO		Vacant	520-823-4292 x103	
Rx Specialist		Vacant	520-823-4292 x102	520-349-6550
Fire Program Tech		Claire Wood	520-823-4292 x100	
Supervisory Tech		Shawn Sullivan	520-823-4292 x105	602-397-1098
Lead Crew		Taylor Amos	520-823-4292 x105	520-488-7706
Forestry Tech		Paul Hensel	520-823-4292 x106	520-668-0021
Forestry Tech		Vacant		
Forestry Tech		Vacant		

Tohono O'odham Nation & BIA				
Position	Call-Sign	Name	Work	Cell
FMO (Acting)	Juan	Tina Juan	520-349-3565	520-471-7719
TOT Fire Chief		Craig Encinas	520-383-8276	520-419-7666
Asst. Fire Chief		Ralph Maldonado	520-383-8276	520-471-0061

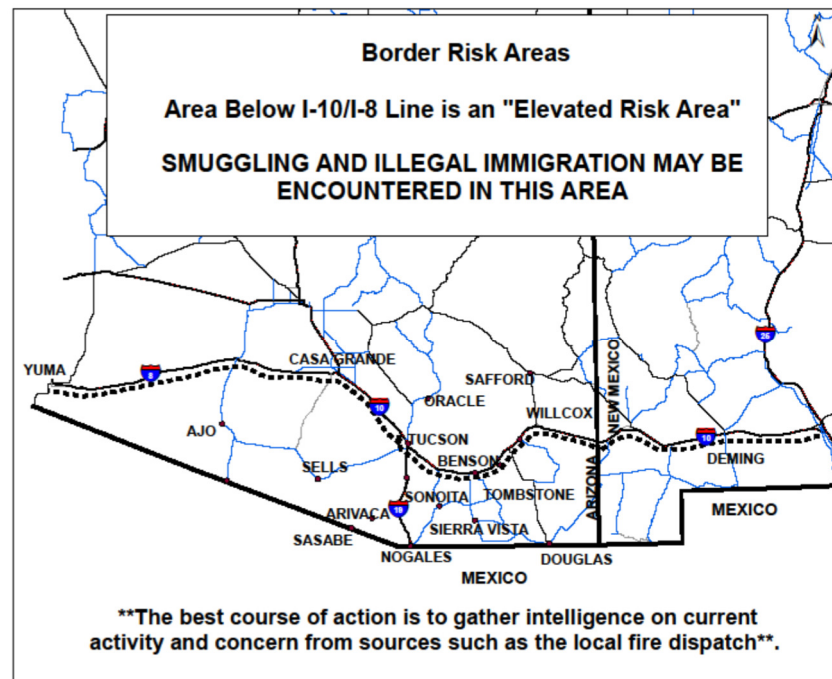
Arizona Department of Forestry and Fire Management—Tucson District A3S				
Position	Call-Sign	Name	Work	Cell
District Manager	Chief 3	Steve Millert	520-628-5486	530-519-0363
AFMO-Operations	Battalion 31	Flip Elliot	520-628-5485	520-419-7666
AFMO-Tucson Dis.	Battalion 32	Jack Upchurch		520-282-0745
AFMO Safford	Battalion 33	Lehi Vizciano		602-653-9142
Engine 361	36	Eric Huddleston		520-429-2473
Engine 362	35	Gilbert Pizano		520-345-0001
Tucson 1 T2 Crew	Captain 31	Brennen Baldwin		520-975-0279
Douglas T2 Crew	Captain 32	Mike Renovato		520-559-3372
Ft Grant T2 Crew	Captain 33	Jacob Pace		623-980-0403
Florence T2 Crew	Captain 34	Joe Hernandez		520-528-7046

Southeast Arizona Zone Dispatch Centers	
Tucson Interagency Dispatch Center (BIA, BLM, FS, FWS, NPS)	520-202-2710
Arizona Interagency Dispatch Center (STATE AND PRIVATE)	623-582-0911

INTERNATIONAL BORDER WATCHOUTS!

Fire fighting at or near the U.S. - Mexico border requires an increased awareness of cross-border activities which may endanger fire fighters. The following **International Border Watchouts** have been developed to assist fire fighters with maintaining safety awareness when working near the border:

1. Anticipate high speed driving and law enforcement pursuits
2. Expect drivers to be distracted
3. Aircraft operations have increased collision risk
4. Radio frequency interference from Mexico is likely
5. Radio/cell phone dead spots increase employee risk
6. Cell phone interference from Mexico is likely
7. Language barriers exist
8. Threats to employees are present 24/7 year-round
9. You are not clearly identified as an agency employee
10. Every visitor contact has potential risk
11. Higher occurrence of encounters with people involved in cross-border activities
12. Traditional responses to situations may not be appropriate
13. Responding to situations inconsistent with authorized authority and training
14. Night operations require special considerations
15. Unattended vehicles may be damaged or stolen
16. Unlawful activities in remote areas
17. Heightened risk of biological contamination
18. Always know your location and be able to describe it
19. Let others know your expected route, destination and estimated time of return (ETR) from the field.



JUSTIFICATION FOR SHIFTS IN EXCESS OF 16 HOURS/ 2:1

The following criteria has been determined to justify working shifts exceeding sixteen consecutive hours and/or the 2:1 work rest guidelines.

FIRE NAME _____ FIRE# _____

NAME	NAME

_____ Shifts in excess of 16 hours/ exceeding 2:1 on _____ (Date) were due to establishing initial control of the fire.

_____ Shifts in excess of 16 hours/ exceeding 2:1 on _____ (Date) were due to dispatching resources during critical fire situation.

_____ Shifts in excess of 16 hours/ exceeding 2:1 on _____ (Date) were due to emergency rescue work.

_____ Arduous travel: Travel on overtime necessary because suitable subsistence and lodging not available to remain until following day (*may be applicable when returning from fire*).

_____ Travel time not administratively controllable. Required to return to home unit as quickly as possible and by most expedient method because of fire situation (*may be applicable when returning from fire detail assignment*).

_____ Other _____

X _____
Incident Commander

Duty Officer Concurrence, Name: _____

Date: _____ Time: _____ Method of Contact: ☐ Phone ☐ In person

FIRE CAUSE DETERMINATION REPORT

Fire Cause Determination Report

FIRE NAME: _____ DATE (mm/dd/yy): _____ FIRE #: _____

REPORT COMPLETED BY: _____

LAND STATUS AT ORIGIN: FEDERAL ☐ STATE ☐ PRIVATE ☐

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

SEQUENCE OF EVENTS **DATE** **TIME** **(List Name & Agency)**

ESTIMATED TIME OF ORIGIN: _____

REPORTED: _____

FIRST ON-SCENE: _____ WHO? _____

ORIGIN PROTECTED, BEGIN: _____ BY _____

SEARCH BEGUN: _____ 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

CAUSE CATEGORIES (Check box and list specific cause, if known).

<input type="checkbox"/> Lightning <input type="checkbox"/> Campfire <input type="checkbox"/> Smoking	<input type="checkbox"/> Debris Burning (Fire Use) <input type="checkbox"/> Arson (Incendiary) <input type="checkbox"/> Equipment	<input type="checkbox"/> Railroad <input type="checkbox"/> Juveniles <input type="checkbox"/> Miscellaneous (explain)
--	--	--

CRITERIA FOR LEO DISPATCH

ARE THERE WITNESSES? ☐ YES ☐ NO NAME OR DESCRIBE: _____

(phone#/address/other): _____

ARE THERE SUSPECTS? ☐ YES ☐ NO NAME OR DESCRIBE: _____

(phone#/address/other): _____

ANY VEHICLES? ☐ YES ☐ NO DESCRIBE: _____

LICENSE # _____ STATE: _____ COLOR: _____ MAKE: _____ MODEL: _____

4) SUSPECT ARSON?	<input type="checkbox"/> YES <input type="checkbox"/> NO	DESCRIBE:
5) ANY EVIDENCE?	<input type="checkbox"/> YES <input type="checkbox"/> NO	DESCRIBE:

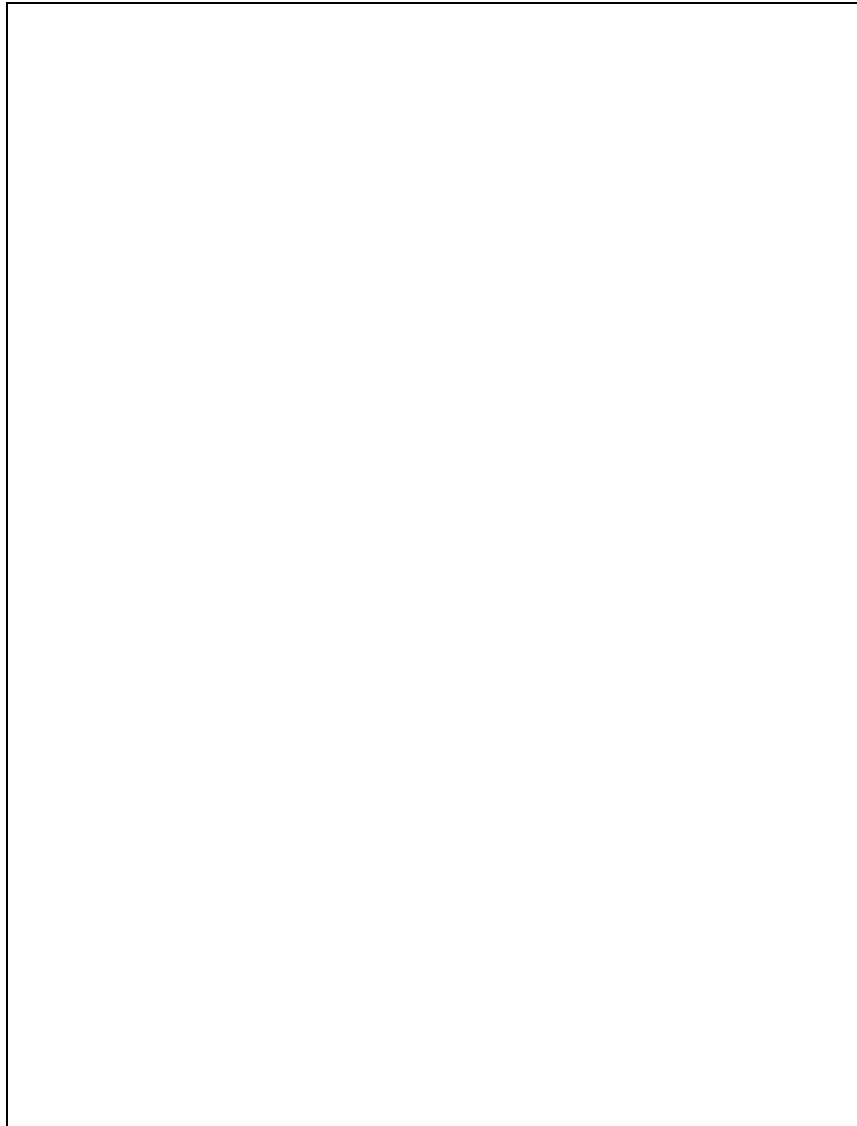
Does evidence need to be collected? ☐ YES ☐ NO

PHOTOGRAPHS TAKEN? ☐ YES (Use photo log) ☐ NO

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

FIRE CAUSE DETERMINATION REPORT

SKETCH OF AREA OF ORIGIN (NOT TO SCALE)



1. Indicate north

2. Create legend

LEGEND

WEATHER (*upon arrival*)

DRYBULB:

WETBULB:

RH:

WD:

WS:

FIRE CAUSE DETERMINATION REPORT

PHOTOGRAPH LOG

PHOTO#	DESCRIPTION (<i>Indicatedirection</i>)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	

Medical Incident Report					
FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.					
FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.					
Use the following items to communicate situation to communications/dispatch.					
1. CONTACT COMMUNICATIONS / DISPATCH (Verify correct frequency prior to starting report). <i>Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."</i>					
2. INCIDENT STATUS: <i>Provide incident summary (including number of patients) and command structure. Ex: "Communications, I have a Red priority patient, unconscious, struck by a falling tree. Requesting air ambulance to Forest Road 1 at (Lat./Long.) This will be the Trout Meadow Medical, IC is TFLD Jones. EMT Smith is providing medical care."</i>					
Severity of Emergency / Transport Priority	<input type="checkbox"/> RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2° – 3° burns more than 4 palm sizes, heat stroke, disoriented.</i>				
	<input type="checkbox"/> YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary. <i>Ex: Significant trauma, unable to walk, 2° – 3° burns not more than 1-3 palm sizes.</i>				
	<input type="checkbox"/> GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport <i>Ex: Sprains, strains, minor heat-related illness.</i>				
Nature of Injury or Illness & Mechanism of Injury					Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)
Transport Request					Air Ambulance / Short Haul/Hoist Ground Ambulance / Other
Patient Location					Descriptive Location & Lat. / Long. (WGS84)
Incident Name					Geographic Name + "Medical" (Ex: Trout Meadow Medical)
On-Scene Incident Commander					Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)
Patient Care					Name of Care Provider (Ex: EMT Smith)
3. INITIAL PATIENT ASSESSMENT: <i>Complete this section for each patient as applicable (start with the most severe patient)</i>					
Patient Assessment: See IRPG page 106					
Treatment:					
4. TRANSPORT PLAN:					
Evacuation Location <i>(if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.)</i> Patient's ETA to Evacuation Location:					
Helispot / Extraction Site Size and Hazards:					
5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:					
Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication					
6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable					
Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
COMMAND					
AIR-TO-GRND					
TACTICAL					
7. CONTINGENCY: <u>Considerations:</u> <i>If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead.</i>					
8. ADDITIONAL INFORMATION: <i>Updates/Changes, etc.</i>					
REMEMBER: Confirm ETA's of resources ordered. Act according to your level of training. Be Alert, Keep Calm, Think Clearly, Act Decisively.					

MEDICAL PLAN

Helispot Landing Zone (LZ) Location:

Elevation:	Topography:	Fuel Type in the Area: Height of Trees:	LZ Surface Description: [] Dirt [] Grass [] Improved Surfaced
Wires/ Aerial Hazards: <i>(Describe the location and height of any known aerial hazards.)</i>			
Eye level Winds: <i>(MPH & Direction)</i>		LZ Visibility: [] Good [] Fair [] Poor	Vehicle Access: [] Yes [] No [] 2 Wheel Drive [] 4 Wheel Drive

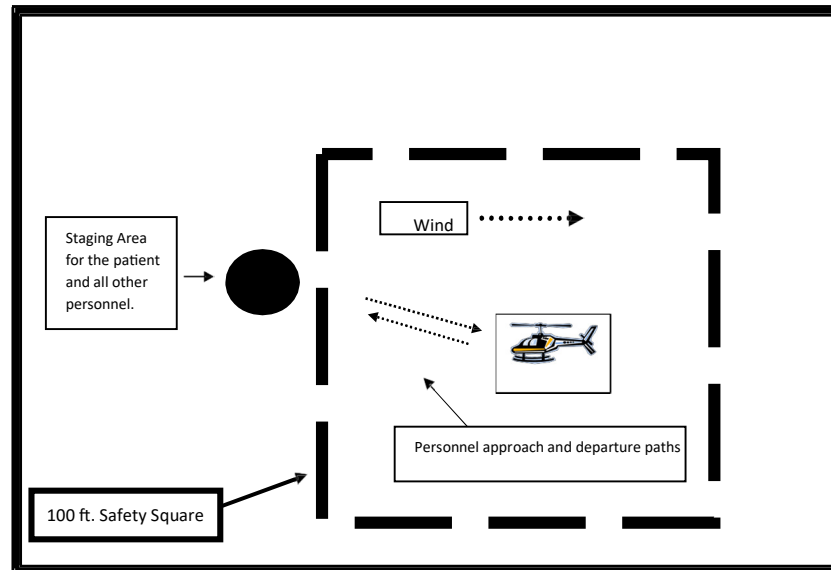
Landing Zone (LZ) Size: The overall size of the LZ needs to be a minimum of 100' square. A small 20'x20' landing pad should be level and cleared of big rocks and high brush. The entire 100 foot square does NOT need to have all brush and trees removed. Try to minimize disturbing grass and brush in the square as it will limit dust when a helicopter lands.

Terrain: Pick out a landing zone (LZ) for the inbound helicopter that has a good approach and departure path and as flat as possible.

Wind Effects: Helicopters need to land into the wind; they will not be able to land with a tail wind. The LZ needs to be accessible by multiple directions to accommodate changes in wind direction.

Aerial Hazards: The approach and departure path needs to be clear of any immediate aerial hazards like, windmill towers, power lines, cables or fences.

Staging Area: Establish a staging area outside the 100' safety square and ensure all personnel and vehicles are there. Having all personnel gathered into one spot, allows the pilot to concentrate on landing the helicopter and allows them some flexibility on the approach direction. Do NOT approach the helicopter until the pilot signals you to do so. Approach at a 45 degree angle off the nose of the helicopter.



Helicopter Landing Zone Diagram

MEDICAL PLAN (ICS 206 WF)
Controlled Unclassified Information//Basic

1	Incident/Project Name			2. Operational Period				
3.	Ambulance Services							
	Na me	Complete Address		Phone & EMS Frequen- cy		Advanced Life Support (ALS) Yes No		
4.	Air Ambulance Services							
	Name	Phone	Type of Aircraft & Capability					
5.	Hospitals							
	Name Com- plete Address	GPS Datum – WGS 84 Coordinate Standard Degrees, Decimal Minutes DD° MM.MMM' N - Lat DD° MM.MMM' W - Long		Travel Time		Phone	Helipad Yes No	Level Of Care Facility
		Lat:	Long:	Air	Gnd		<input type="checkbox"/>	<input type="checkbox"/>
		VHF:					<input type="checkbox"/>	<input type="checkbox"/>
		Lat:	Long:	Air	Gnd		<input type="checkbox"/>	<input type="checkbox"/>
		VHF:					<input type="checkbox"/>	<input type="checkbox"/>
		Lat:	Long:	Air	Gnd		<input type="checkbox"/>	<input type="checkbox"/>
		VHF:					<input type="checkbox"/>	<input type="checkbox"/>
6.	Division Branch	Group	Area Location Capability					
			EMS Responders & Capa- bility:					
			Equipment Available on Scene:					
			Medical Emergency Chan- nel:					
			ETA for Ambulance to Scene:					
			Air:					
			Ground:					
			Approved Helispot:					
			Lat:					
			Long:					
			EMS Responders & Capa- bility:					
			Equipment Available on Scene:					
			Medical Emergency Chan- nel:					
			ETA for Ambulance to Scene:					
			Air:					
			Ground:					
			Approved Helispot:					
			Lat:					
			Long:					

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? (circle) Yes No

X _____
Signed (Appropriate Agency Reviewing Official) Title Date

SAFENET To submit a SAFENET go to: https://safenet.nifc.gov/index.cfm		
REPORTED BY:		
Name (optional):		Phone:
Agency/Organization:		Date Reported:
EVENT		
Date and Time:		Jurisdiction/Local Unit:
Incident Name & Number:		State:
Incident Type	Incident Activity	Stage of Incident
<input type="checkbox"/> Wildland <input type="checkbox"/> Prescribed <input type="checkbox"/> Wildland Fire Use <input type="checkbox"/> All Risk <input type="checkbox"/> Training <input type="checkbox"/> Fuel Treatment <input type="checkbox"/> Work Capacity Test	<input type="checkbox"/> Line <input type="checkbox"/> Support <input type="checkbox"/> Transport to/from <input type="checkbox"/> Readiness/Preparedness	<input type="checkbox"/> Initial Attack <input type="checkbox"/> Extended Attack <input type="checkbox"/> Transition <input type="checkbox"/> Mop Up <input type="checkbox"/> Demob <input type="checkbox"/> Non-Incident <input type="checkbox"/> Other
Position Title:		
Task:		
Management Level:		
Resources Involved :		
CONTRIBUTING FACTORS		
<input type="checkbox"/> Fire Behavior <input type="checkbox"/> Human Factors	<input type="checkbox"/> Environmental <input type="checkbox"/> Equipment	<input type="checkbox"/> Communications <input type="checkbox"/> Other (Explain Below)
Other:		
NARRATIVE		
Describe in detail what happened including the concern or potential issue, the environment (weather, terrain, fire behavior, etc.), and the resulting safety/health issue. If more room is required, use a separate piece of paper and include it with this form.		
CORRECTIVE ACTION		
Document how you tried to resolve the problem and list anything that, if changed, would prevent this safety issue in the future.		

MEDICAL PLAN (ICS 206 WF)
Controlled Unclassified Information//Basic

7.	Name & Location	Remote Camp Location(s)			
		Point of Contact:			
		EMS Responders & Capability:			
		Equipment Available on Scene:			
		Medical Emergency Channel:			
		ETA for Ambulance to Scene:			
		Air:			
		Ground:			
		Approved Helispot:			
		Lat:			
		Long:			
		Point of Contact:			
		EMS Responders & Capability:			
		Equipment Available on Scene:			
		Medical Emergency Channel:			
		ETA for Ambulance to Scene:			
		Air:			
		Ground:			
		Approved Helispot:			
		Lat:			
		Long:			
8.	Prepared By (Medical Unit Leader)	9. Date/Time	10.	Reviewed By (Safety Officer)	11. Date/Time

BURN INJURY PROTOCOL

The following standards will be used when any firefighter sustains burn injuries, regardless of agency jurisdiction.

After on-site medical response, initial medical stabilization, and evaluation are completed the Agency Administrator or designee having jurisdiction for the incident, and/or a firefighter representative (e.g., Crew Boss, Medical Unit Leader, Compensations for Injury Specialist, etc.) will coordinate with an attending physician to ensure that a firefighter whose burn injuries meet any of the burn injury criteria listed below is appropriately referred to the nearest regional burn center. Burn injuries are often difficult to evaluate and may take 72 hours to manifest. When there is any doubt about the severity of a burn, or if criteria are met for a burn injury, the Agency Administrator or designee will request the treating physician admit and arrange for the transport of the burned employee to a certified burn center. *It is important for the attending physician to request admittance of the burned employee direct to the burn center and not release the patient for follow-up treatment at another medical facility or with another physician.*

American Burn Association (ABA) Burn Injury Criteria:

- Partial thickness burns (second degree) involving greater than 10% Total Body Surface Area (TBSA).
- Burns (second degree) involving the face, hands, foot, genitalia, perineum, or major joints.
- Third-degree burns of any size are present.
- Electrical burns, including lightning injury, or chemical burns are present.
- Inhalation injury is suspected.
- Burn injury on someone with preexisting medical disorders that could complicate management, prolong recovery or affect mortality (e.g., diabetes).
- Any patient with burns and associated trauma (such as fractures) in which the burn injury poses the greatest risk of morbidity or mortality. In such cases, if the trauma poses the greater immediate risk, the patient may be initially stabilized in a trauma center before being transferred to a burn unit.

ABA Verified Burn Center (Arizona):

Arizona Burn Center at Maricopa Medical Center
2601 E. Roosevelt
Phoenix, AZ 85008
602-344-5624
24/7 Emergency Number: 800-749-2876

More information on Burn Centers:

<http://ameriburn.org/public-resources/burn-center-regional-map/>



UNIT LOG

[illegible]

UNIT LOG

[illegible]

UNIT LOG

[illegible]

NOTES

[illegible]

SOUTHEAST ZONE DELEGATION OF AUTHORITY



March 2019

To: Type 3, 4, and 5 Incident Commanders

From: South East Zone Agency Administrators

Subject: Delegation of Authority and Letter of Expectations for Type 3, 4 and 5 Incident Commanders

We delegate the authority to manage Wildland fires within the South East Arizona Zone Fire Management Area to all local Type 3, 4 and 5 Incident Commanders (to include out of area resources assisting within South East Zone). This delegation applies to short duration or emerging incidents (for more complex incidents a specific delegation of authority must be initiated). As an IC, you must keep firefighter and public safety your highest priority on every fire. Additionally, you should manage the incident cost-efficiently and with as little environmental damage as possible. Section IX Operations, Paragraphs 2 Fire Notifications and 4 Independent Action both require prompt notification of the Jurisdictional Agency. This prompt notification allows the jurisdictional agency to guide the fire management activity being conducted. This assists with appropriate use of fire in the ecosystem and cost containment.

We further want to convey our expectation about your responsibilities on Type 3, 4 and 5 Incidents. The following list of expectations and responsibilities will help each of you:

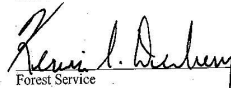
- Develop and implement viable strategies and tactics for the incident, monitor their effectiveness and disengage immediately if strategies and tactics cannot be implemented safely.
- Maintain command and control of the incident.
- Give thorough and complete briefings (see the Incident Response Pocket Guide).
- Implement the Risk Management Process, as outlined in the Incident Response Pocket Guide.
- Assure Work-Rest Guidelines are strictly followed.
- Establish a unified command quickly when appropriate (multi-jurisdictional situations).
- For Type 3 ICs, do not assume any collateral duties.
- Ensure Mutual Respect is adhered to and followed.

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 cases where you take appropriate precautions to safeguard firefighters and the public within the scope of your duties.


Arizona Department of Forestry and Fire Management


Fish and Wildlife Service


Bureau of Indian Affairs


Forest Service


Bureau of Land Management


National Park Service

MANAGEMENT REVIEW CHECK:

FMO/AFMO: _____ **DATE:** _____

LINE OFFICER: _____ **DATE:** _____