

SPOT REQUEST
(See reverse for instructions)

I. REQUESTING AGENCY WILL FURNISH:

1. Time†	2. Date	3. Name of Incident or Project	4. Requesting Agency
5. Requesting Official		6. Phone Number	7. Fax Number
8. Contact Person			
9. Ignition/Incident Time and Date	12. Reason for Spot Request (choose one only) <input type="radio"/> Wildfire <input type="radio"/> Non-Wildfire Under the Interagency Agreement for Meteorological Services (USFS, BLM, NPS, USFWS, BIA) <input type="radio"/> Non-Wildfire State, tribal or local fire agency working in coordination with a federal participant in the Interagency Agreement for Meteorological Services <input type="radio"/> Non-Wildfire Essential to public safety, e.g. due to the proximity of population centers or critical infrastructure.		13. Lat/Lon or Legal (T/R):
10. Size (Acres)			14. Elevation (ft, Mean Sea Level) Top: Bottom:
11. Type of Fire <input type="radio"/> Wildfire <input type="radio"/> Prescribed Fire <input type="radio"/> WFU <input type="radio"/> HAZMAT <input type="radio"/> Search And Rescue			15. Drainage
		16. Aspect	17. Sheltering <input type="radio"/> Full <input type="radio"/> Partial <input type="radio"/> Unsheltered
18. Fuel Type: <u> </u> Grass <u> </u> Brush <u> </u> Timber <u> </u> Slash <u> </u> Grass/Timber Understory <u> </u> Other _____ Fuel Model: <u> </u> 1,2,3 <u> </u> 4,5,6,7 <u> </u> 8,9,10 <u> </u> 11,12,13 <u> </u> 2,5,8			

19. Location and name of nearest RAWs station (distance & direction from project):

20. Weather Observations from project or nearby station(s): (Winds should be in compass direction e.g. N, NW, etc.)

Place	Elevation	†Ob Time	20 ft. Wind		Eye Level Wind.		Temp.		Moisture		Remarks <i>(Indicate rain, T'storms, etc. Also wind condition and 10ths of cloud cover)</i>
			Dir	Speed	Dir	Speed	Dry	Wet	RH	DP	

21. Requested Forecast Period †Time Date	22. Primary Forecast Elements (Check all that are needed) <i>(for management ignited wildland fires, provide prescription parameters):</i>		
Start _____	Today	Tonight	Tomorrow
End _____	Sky/Weather _____	_____	_____
	Temperature _____	_____	_____
	Humidity _____	_____	_____
	Eye Level Wind _____	_____	_____
	20 ft Wind _____	_____	_____
	Haines Index _____	_____	_____
	Smoke Dispersion _____	_____	_____
	Wave/Swell Height _____	_____	_____
	Wave/Swell Direction _____	_____	_____

23. Send Forecast to: ATTN:	24. Location:	25. Phone Number: Fax Number:
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Remarks (Special requests, incident details, Smoke Dispersion elements needed, etc.):

II. FIRE WEATHER FORECASTER WILL FURNISH:

26. FORECAST AND OUTLOOK (see attached)

Name of Forecaster:	NWS Office:	Time and Date:
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III. REQUESTING AGENCY WILL COMPLETE UPON RECEIPT OF FORECAST:27. **FEEDBACK to NWS:** Please provide feedback to NWS staff on forecast accuracy etc. (see instructions)**IV. FORECAST RECEIVED:****TIME:** **DATE:** **NAME:****EXPLANATION OF SYMBOLS:** † Use 24-hour clock to indicate time. Example: 10:15 p.m. = 2215; 10:15 a.m. = 1015
Indicate local standard time or local daylight time

WS FORM D-1

WS FORM D-1, May 2004 INSTRUCTIONS:**I. Incident Personnel:**

1. Complete all items in sections I, III and IV each time a special forecast is requested.
 - a. Example of weather conditions on site:
 - b. If the incident (HAZMAT, SAR) involves marine, put the wave/swell height and direction in the Remarks section.

13. Weather Observations from project or nearby station(s):

Place	Elevation	†Ob Time	20 ft. Wind		Eye Level Wind.		Temp.		Moisture		Remarks <i>(Indicate rain, T'storms, etc. Also wind condition and 10ths of cloud cover)</i>
			Dir	Speed	Dir	Speed	Dry	Wet	RH	DP	
Unit G-50	1530'	0830	NW	6-8	NW	3-5	32		72		Observations from unit RAWS station, 50% cloud cover.

2. Transmit in numerical sequence or fax to the appropriate Fire Weather Office. (A weather forecaster on duty will complete the special forecast as quickly as possible and transmit the forecast and outlook to you by the method requested)
3. Retain completed copy for your records.
4. Provide feedback to NWS utilizing Section III, #27 or separate page. Be sure to include a copy of the spot forecast with any feedback submission including forecaster's name. Feedback to NWS personnel is imperative to assist with future forecasts. Remember, feedback on correct forecasts is equally as valuable as feedback on incorrect forecasts! If spot forecast is significantly different than conditions on site, a second forecast may be required.

II. ALL RELAY POINTS should use this form to insure completeness of date and forecast. A supply of this form should be kept by each dispatcher and all others who may be relaying requests for forecasts or relaying completed forecasts to field units.

III. Forms are available from your local National Weather Service Fire Weather Forecast Office. They may also be reproduced by other agencies as needed, entering the phone number and radio identification if desired.