



Moab Interagency Fire Incident Organizer 2008

MIFC INITIAL ATTACK FREQUENCY PLAN					
The following frequencies are assigned by MIFC for initial attack fires within the dispatch area.					
Identifier	Agency	RX	TX	Mode	
State Fire Marshal	MIFC	158.280	158.280	Wide	
Tac 1	MIFC	166.2375	166.2375	Narrow	
Tac 2	MIFC	166.9625	166.9625	Narrow	
Tac 3	MIFC	166.1125	166.1125	Narrow	
Tac 4	MIFC	156.0675	156.0675	Narrow	
Tac 5	MIFC	168.175	168.175	Narrow	
Tac 6	MIFC	168.725	168.725	Narrow	
Air-to-Ground 1	MIFC	172.325	172.325	Narrow	
Air-to-Ground 2	MIFC	171.575	171.575	Narrow	
Air-to-Ground 3	MIFC	170.000	170.000	Narrow	
Air-to-Ground 4	MIFC	154.310	154.310	Narrow	
Portable Repeater/Relay (SOA RPT 1)	MIFC	168.775	164.9125	Narrow	
Portable Repeater/Relay (SOA RPT 2)	MIFC	172.1375	166.3125	Narrow	
The following is a list of agency command frequencies used within MIFC					
NAME	AGENCY	RX	TX	TX Tone	
BLM – Price Simplex	UT-MOD	172.675	172.675	Simplex	
BLM – Moab Simplex	UT-MOD	172.775	172.775	Simplex	
BLM- Monticello Simplex	UT-MOD	172.475	172.475	Simplex	
FS- Manti Simplex	UT-MLF	171.425	171.425	Simplex	
Price Bruin Peak	UT-MOD	172.6750	164.4750	110.9	
Moab Bald Mesa	UT-MOD	172.425	164.375	103.5	
Monticello Abajo Peak	UT-MOD	172.4750	163.3375	123.0	
Teat Mtn	UT-MLF	171.425	164.375	100.0	
Ford Ridge	UT-MOD	172.6750	164.4750	131.8	
Nine Mile	UT-MOD	172.6750	164.4750	146.2	
Sand Wash	UT-MOD	168.0125	168.0125	167.9	
Book Cliff	UT-MOD	172.1375	166.3125	167.9	
Carpenter Ridge	UT-MLF	171.425	164.375	103.5	
South Long Point	UT-MOD	172.4750	163.3375	157.6	
Deadman Point	UT-MLF	171.425	164.375	123.0	
Wilderness	UT-MLF	171.425	164.375	131.8	
Mineral Bottom	UT-MOD	168.0125	168.0125	167.9	
Cedar mtn	UT-MLF	171.425	164.375	146.2	
Flagstaff	UT-MLF	171.425	164.375	167.9	
White Pine	UT-MLF	171.425	164.375	131.8	
Horseshoe Flat	UT-MLF	171.425	164.375	136.5	
Monument Peak	UT-MLF	171.425	164.375	156.7	
Levan Peak	UT-MLF	171.435	164.375	136.5	
Tidds Peak	UT-MLF	171.425	164.375	110.9	
Air/Air	124.075	NAT FF	168.650	Air Guard	168.625



Prior to responding to an incident obtain the following information:

WildCAD Number	
Descriptive Location	
Command Freq.	
Tactical Freq.	
Air to Ground Freq.	
Air to Air Freq.(as needed)	

Relay the following information to dispatch upon first visual contact:

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

Complete the following table before submitting:

Incident Number	UT-
P# / Fire Code #	
District / Unit	
Fire Report Completion Date	

The final IC will submit the Incident Organizer along with all other associated documentation to the Zone FMO/AFMO responsible for the fire.

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

Moab Interagency Fire Management Area

MEMORANDUM

May 10, 2007

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 and implement viable strategies and tactics for the incident.
- Follow the procedure for completing this Incident Organizer as outlined in the table of contents.
- Develop, implement, and monitor safe and effective Incident Action Plan objectives which reflect local fire and resource management goals. If a WFSA is completed, use it as a guide for IAP development.
- Disengage suppression activities immediately if strategies, tactics, and communications cannot be maintained safely.
- Maintain command and control of the incident at all times.
- Document any Transfer of Command on ICS form 214; relay this information to all fireline personnel and dispatch.
- Give complete briefings to fireline personnel (see the *Incident Response Pocket Guide*).
- Document all briefings on the Resource Summary.
- Complete the Incident After Action Review.
- **Do not assume collateral duties** as Type 3 Incident Commanders.
- Implement the Risk Management Process, as outlined in the *Incident Response Pocket Guide*.
- Monitor fatigue levels; ensure that work/rest policy is adhered to.
- **This booklet will be completed on all Type 3, 4 and 5 Forest Service 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.

IMPORTANT PHONE NUMBERS

FIRE MANAGEMENT		Work	Home	Cellular
State (3A80)	Bill Zanotti, SE UT Manager	259-3766	259-4335	260-9809
NPS	Paul Cowan, Acting Fire Coordinator	719-2122	259-8669	260-1825
USFS	Colt Mortenson, Forest FMO MLF-SO	636-3502		650-4795
USFS	Brandon Hoffman, NZ FMO	636-3594	748-5328	650-4797
USFS	Joe Arnold, NZ AFMO	636-3317	283-4381	650-4794
USFS	Mickey Smith-Kause, SZ FMO	636-3369	259-0403	260-2086
USFS	Brian Mattox, SZ AFMO	636-3342	587-2089	260-2089
BLM	Mike Benefield, FMO Moab	259-2191	259-7862	259-9669
BLM	Leann Garcia, AFMO Moab	259-1881	259-5894	259-9667
BLM	"vacant", Cache Manager	259-1890	259-6665	259-9664
BLM	Jackie Stevens, Procurement	259-2104	259-7873	259-9671
USFS	Melinda Schmidt, Procurement	636-3375	259-5266	260-2358
NWS - Utah	Salt Lake City NWS	801-524-5066		
NWS - Colorado	Grand Junction NWS	970-256-9463		
DISPATCH CENTER 259-1850 FAX: 259-1860		Work	Home	Cellular
Center Manager	Cheryl Carpenter	259-1851	259-1989	220-1086
Asst. Center Mgr.	Vacant	259-1852		
Emergency Ambulance Services				
Emery Ambulance	Castle Dale UT	435-381-2404	East Carbon UT	435-888-4411
Grand County	Moab UT	435-259-1341	Castle Dale UT	435-381-2305
Green River	Green River UT	435-564-3398	Ephraim UT	435-283-4076
San Juan	Blanding UT	435-678-2034	Green River UT	435-565-3434
St. Mary's Air Life	Grand Junction CO	800-332-4923 970-244-1920	Montezuma Cr. UT	435-651-3291

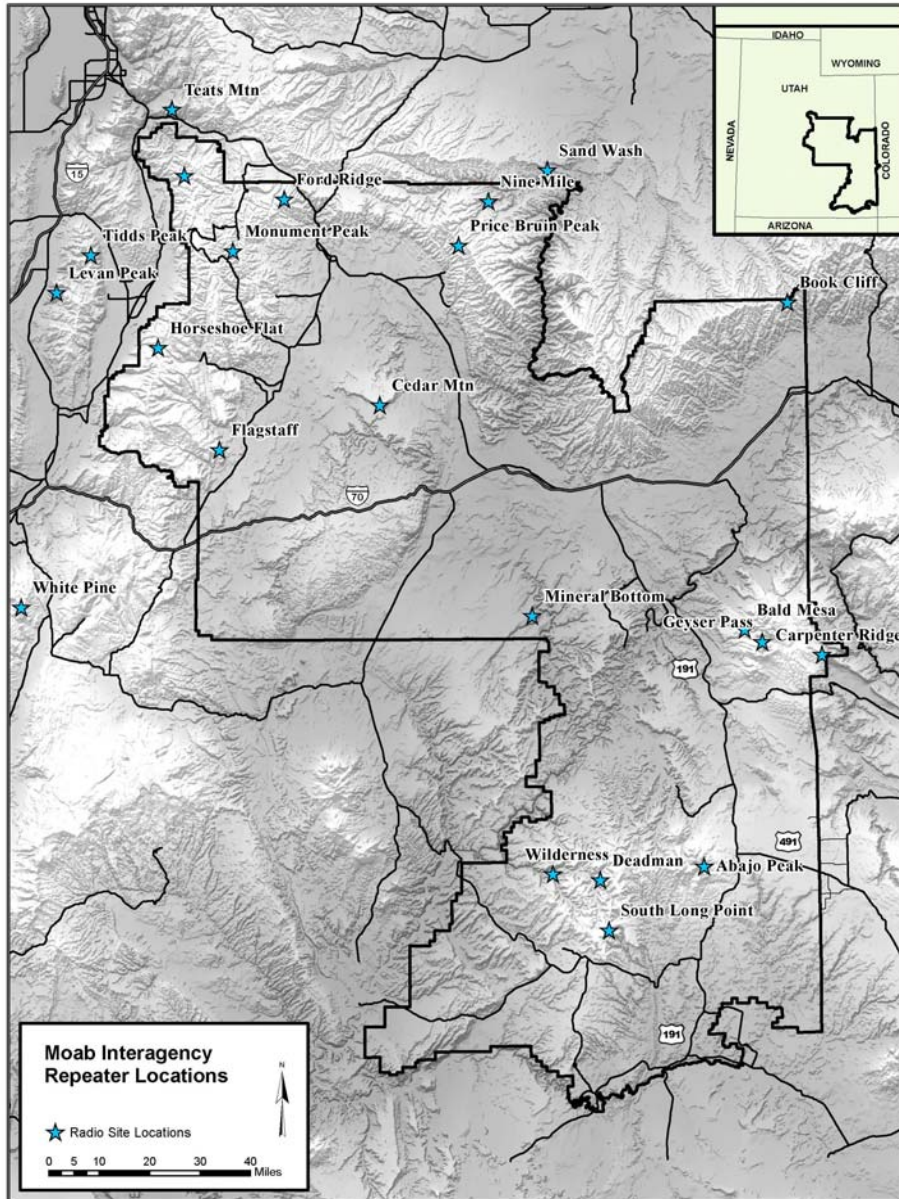


TABLE OF CONTENTS AND INSTRUCTIONS

* Items are required to be filled in for 30-mile accident prevention (Forest Service)		
Document Name	Required Documentation for:	Pg.
* Resource Summary	All Fires	4
* Incident Complexity Analysis	All Fires	5
* Field Fire Report	All Fires	6
* Fire Report Data	All Fires	7
* Incident Commander SOP Checklist	All Fires	8-9
Fire Cause Determination Report	All suspected human caused fires	10-11
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.	12-13
* Incident Action Plan	An IAP is required on the 2 nd day of an uncontained fire. Objectives required for all USFS	14-15
Unit Log	Any major event on all fires	16-17
Incident Status Summary (ICS-209)	All fires in Timber over 100 acres and in grass over 30 acres.	18-19
* Incident After Action Review	All Fires. Agency Official may review and sign.	20
SAFENET	All situations applicable	21
* Documentation for Shifts in Excess of 16 hours and 2:1 work rest.	All fires where applicable, prior to exceeding	22
Notes	Misc notes	23-24
IA Resources	Reference Document	25
MIFC Repeater Map	Reference Document	26
MIFC Contact Lists	Reference Document	27
MIFC Frequency Plan	Reference Document	28

NOTES:

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) C&G Staff positions are not activated. (b) Resources vary from one to five firefighters. (c) Incident is normally contained rapidly during IA. (d) A written action plan is not required.

Type 4 Characteristics: (a) C&G Staff positions are not activated. (b) Resources vary from single Firefighter to several single resources or a single Task Force or Strike Team. (c) The incident is limited to one operational period in the control phase. Mop-up may extend into multiple periods. (d) A written plan is not required.

Type 3 Characteristics: (a) Some of the C&G Staff may be activated, as well as DIVS/GROP Supervisor and Unit leaders. (b) Resources vary from several single resources to several TFL's/STL's. (c) Incident may be separated into several divisions, but usually does not meet the DIVS/GROP Supervisor position for span or control. (d) May involve several burning periods prior to control, which requires a written action plan.

FIELD FIRE REPORT

FIRE NAME: _____ **FIRE NUMBER:** _____
DATE: _____ **TIME:** _____

INITIAL SIZE-UP BRIEFING (Report to Dispatch Center)

INCIDENT COMMANDER: _____

DESCRIPTIVE LOCATION: _____

LEGAL: Twnshp _____ Range _____ Section (s) _____

COORD: UTM: Z _____ E _____ N _____

LAT: Deg _____ Min _____ Sec _____ LONG: Deg _____ Min _____ Sec _____

OWNERSHIP(s): _____ ESTIMATED SIZE: _____ acres

CAUSE: Natural _____ Human _____ → Fire Investigator (name): _____

ESTIMATED CONTAINMENT: DATE: _____ TIME: _____

ESTIMATED CONTROL: DATE: _____ TIME: _____

VALUES THREATENED: N NO Y YES(specify: _____)

CONTROL PROBLEMS: N NO Y YES (specify: _____)

ADDITIONAL RESOURCES NEEDED: N NO Y YES (specify: _____)

SPREAD POTENTIAL:

1 Low 2 Moderate 3 High 4 Extreme

FIRE BEHAVIOR:

1 Smoldering 3 Running 5 Torching 7 Crowning/Spotting

2 Creeping 4 Spotting 6 Crowning 8 Erratic

FLAME LENGTH (Average flame length at head of fire): _____ feet

WIND SPEED _____ MPH WIND DIRECTION N S E W NW NE SW SE

TOPOGRAPHY (Topography in vicinity of fire origin):

1 Ridgetop 4 Middle 1/3 of slope 7 Valley Bottom

2 Saddle 5 Lower 1/3 of slope 8 Mesa or plateau

3 Upper 1/3 of 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 56-75% 5 76+%

FBPS FUEL MODEL:

1 Short Grass (1 ft) 5 Brush (2 ft) 9 Hardwood Litter

2 Timber w/ Grass Understory 6 Dormant Brush 10 Timber (Litter & Understory)

3 Tall Grass (3 ft) 7 Southern Rough 11 Light Logging Slash

4 Chaparral/Brush (6 ft) 8 Closed Timber Litter 12 Medium Logging Slash

ASPECT: (Circle) N S E W NW NE SW SE

ELEVATION: Top _____ feet. Bottom _____ feet.

STAGING AREA LOCATION: _____

LCES SAFETY CHECKLIST

Safety Concerns: NO YES (Specify _____)

NOTES:

FINAL FIRE REPORT DATA

The information from this sheet will be used to complete the agency specific Fire Reports

*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 # _____

EMPLOYEES

NAME	NAME

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

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

___ Shifts in excess of 16 hours/ exceeding 2:1 on _____ (Date) was 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

Discovery Date and Time:	mm/dd/yyyy:	Time:
Initial Attack Date and Time:	mm/dd/yyyy:	Time:
Containment Date and Time:	mm/dd/yyyy:	Time:
Control Date & Time:	mm/dd/yyyy:	Time:
Out Date & Time:	mm/dd/yyyy:	Time:
Total Acres Burned: _____		
Acres Burned By Ownership:		
1) BLM	3) NPS	5) USFS
2) BIA	4) FWS	6) PRIVATE
		7) STATE
		8) OTHER
NFDRS outputs on Start Date:	BI	ERC
Acres at time of Discovery: _____		
Acres at time of IA: _____		
Lat & Long (NAD83) at Origin:	LAT	LONG
UTM (NAD83) at Origin:	Z	E N
Fire Cause:	() 1. Lightning	() 4. Camp Fire
	() 2. Equipment Use	() 5. Debris Burning
	() 3. Smoking	() 6. Railroad
		() 7. Arson
		() 8. Children
		() 9. Other
Topography:		
Aspect at Origin:	() NW	() N
	() SE	() S
		() NE
		() SW
		() E
		() W
Slope at Origin: _____		
High Elevation _____		
Low Elevation _____		
Name of Closest RAWs: _____		
Fuel Description: _____		
REMARKS:		

Incident Commander SOP Checklist

- Verify all frequencies assigned and all units responding to the fire.
- Name the fire and obtain a fire number from NUIFC. Use the closest geographical reference and keep it short.
- Flag the route to the fire. (Red and white striped flagging for BLM) 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 Marshall 154.280 Tx/Rx.
- Complete the Initial Size-up Briefing on the Initial Field Fire Report and relay this information to NUIFC 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.
- Determine ownership and relay UTM coordinates and/or LAT LONG DDMSS (NAD 83) to NUIFC. Request a GIS specialist (or equivalent for USFS) if the fire could be close to ten acres or larger, or if the ownership of the fire is not clear.
- Establish a unified command when appropriate. Ensure NUIFC and all resources on the fire know who is in command.
- Order the necessary and appropriate operational resources through NUIFC. Plan for operational resources needed to control the fire.
- Ensure all contract resources are inspected through NUIFC prior to obtaining an assignment.

SAFE NET		
CALL TO FILE (1-888-670-3938) Wildland Fire Safety and Health Network FILE ONLINE AT www.nifc.gov and click on the SAFE NET link		
REPORTED BY		
Name (optional) _____	Phone _____	
Agency/Organization _____	Date Reported _____	
EVENT		
Date and Time _____	Jurisdiction/Local Unit _____	
Incident Name & Number _____		State _____
<i>Incident Type</i>	<i>Incident Activity</i>	<i>Stage of Incident</i>
<input type="checkbox"/> Wildland		<input type="checkbox"/> Initial Attack
<input type="checkbox"/> Prescribed	<input type="checkbox"/> Line	<input type="checkbox"/> Extended Attack
<input type="checkbox"/> Wildland Fire Use	<input type="checkbox"/> Support	<input type="checkbox"/> Transition
<input type="checkbox"/> All Risk	<input type="checkbox"/> Transport to/from	<input type="checkbox"/> Mop Up
<input type="checkbox"/> Training	<input type="checkbox"/> Readiness/Preparedness	<input type="checkbox"/> Demob
<input type="checkbox"/> Fuel Treatment		<input type="checkbox"/> Non-Incident
<input type="checkbox"/> Work Capacity Test		<input type="checkbox"/> Other
Position Title _____		
Task _____		
Management Level _____		
Resources Involved _____		
CONTRIBUTING FACTORS		
<input type="checkbox"/> Fire Behavior	<input type="checkbox"/> Environmental	<input type="checkbox"/> Communications
<input type="checkbox"/> Human Factors	<input type="checkbox"/> Equipment	<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		
Please document how you tried to resolve the problem and list anything that, if changed, would prevent this safety issue in the future.		

***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 _____
(Appropriate Agency Reviewing Official)

_____ (Title)

_____ (Date)

Incident Commander SOP Checklist (continued)

- NUIFC 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 NUIFC. Request a spot weather forecast for each operational period that the fire is uncontrolled or if a Red Flag Warning/Fire Weather Watch has been issued.
- Confirm with NUIFC that the duty officer has been briefed.
- Notify NUIFC if dispatch will need to extend staffing.
- Submit a completed Intelligence Summary (ICS-209) to NUIFC by 2000 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.
- Order logistical resources needed to control the fire through NUIFC.
- Facilitate incident AARs after each operation period. Document a final incident AAR on after the fire is controlled.
- Complete all appropriate CTRs, shift tickets and evaluations for all off unit resources prior to their demob.
- Keep NUIFC informed on changes in conditions/personnel hourly or as needs arise.
- Demob resources according to driving limits and work/rest issues. Coordinate with duty officer for competitive resources.
- Complete the Final Fire Report Data form in the Incident Organizer when the fire is declared out.
- Ensure an Interagency Cost Share Agreement has been completed as per agency guidelines for multi-jurisdictional incidents.

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	

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

Incident Status Summary (continued)

Outlook															
34: Estimated Control Date and Time:				35: Projected Final Size:				36: Estimated Final Cost:							
37: Actions planned for next operational period:															
38: Projected incident movement/spread during next operational period in 12, 24, 48 and 72 hour time frames: 12 hours: 24 hours: 48 hours: 72 hours:															
39: For fire incidents, describe resistance to control in terms of: 1. Growth Potential - 2. Difficulty of Terrain -															
40: Given the current constraints, when will the chosen management strategy succeed?															
41: Projected demobilization start date:															
42: Remarks:															
43: Committed Resources															
Agency	CRW1		CRW2		HEL1	HEL2	HEL3	ENGS		DOZR		WTDR	OVHD	Camp Crews	Total Personnel
	SR	ST	SR	ST	SR	SR	SR	SR	ST	SR	ST	SR	SR		
PRI															
BLM															
CNTY															
ST															
USFS															
Total															
44: Cooperating and Assisting Agencies Not Listed Above:															
Approval Information															
45: Prepared by:				46: Approved by:				47: Sent to:		By:					
								Date:		Time:					

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

Incident Status Summary (ICS-209)

1: Date	2: Time	3: Initial <input type="checkbox"/> Update <input type="checkbox"/> Final <input type="checkbox"/>		4: Incident Number	5: Incident Name
6: Incident Kind	7: Start Date	Time	8: Cause	9: Incident Commander	10: IMT Type
11: State-Unit	12: County		13: Coordinates at Point of Origin (NAD83): Lat: Long:		14: Short Location Description (in reference to nearest town):
Current Situation					
15: Size/Area Involved	16: % Contained or MMA	17: Expected Containment Date: Time:		18: Line to Build	19: Costs to Date
20: Declared Controlled Date: Time:					
21: Injuries this Reporting Period:	22: Injuries to Date:	23: Fatalities	24: Structure Information		
			Type of Structure	# Threatened	# Damaged
					# Destroyed
25: Threat to Human Life/Safety: Evacuation(s) in progress ---- No evacuation(s) imminent -- Potential future threat ----- No likely threat -----			Residence		
			Commercial Property		
			Outbuilding/Other		
26: Communities/Critical Infrastructure Threatened (in 12, 24, 48 and 72 hour time frames): 12 hours: 24 hours: 48 hours: 72 hours:					
27: Critical Resource Needs (kind & amount, in priority order): 1. 2. 3.					
28: Major problems and concerns (control problems, social/political/economic concerns or impacts, etc.) Relate critical resources needs identified above to the Incident Action Plan.					
29: Natural and Cultural Resources to be Protected (kind(s) and value/significance):					
30: Current Weather Conditions Wind Speed: Temperature: Wind Direction: Relative Humidity:					
31: Fuels/Materials Involved (use the 13 Fire Behavior Fuel Models and include additional fuels in he text box):					
32: Today's observed fire behavior (leave blank for non-fire events):					
33: Significant events today (closures, evacuations, significant progress made, etc.):					

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.	
12.	

