

2008 – EMERGENCY EQUIPMENT INFORMATION

The intent of this agreement is to obtain fully operated equipment to be used for direct support of emergency incidents.

All equipment and operators must meet the specifications as listed in the *Interagency Incident Business Management Handbook* (FSH 5109.34) and the R-1 Northern Rockies Coordinating Group (NRCG) Supplements. Additional information is located at: <http://www.fs.fed.us/r1/fire/nrcg/agree-contract/equip.html>.

PLEASE complete each block of information.

COMPANY NAME:			
CONTACT PERSON'S NAME:			
MAILING ADDRESS: (Enter one address for both correspondence and payments)			
CITY, STATE, ZIP CODE:			
PHONE NUMBERS: (List up to 6 numbers)	1 _____ [] day [] night [] cell [] fax	4 _____ [] day [] night [] cell [] fax	
	2 _____ [] day [] night [] cell [] fax	5 _____ [] day [] night [] cell [] fax	
	3 _____ [] day [] night [] cell [] fax	6 _____ [] day [] night [] cell [] fax	
TYPE OF CONTRACTOR: (Check all applicable)	<input type="checkbox"/> Small Business	<input type="checkbox"/> Large Business	<input type="checkbox"/> Service Disabled Veteran
	<input type="checkbox"/> HUB Zone	<input type="checkbox"/> Woman-Owned	<input type="checkbox"/> Government Employee
	<input type="checkbox"/> Small Disadvantage Owned	<input type="checkbox"/> Native American	<input type="checkbox"/> Other: _____
TAX ID NUMBER OR SSN:			
DUNS NUMBER:	Are you registered in CCR? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Shift length: One shift is based on a 14-hour day average (normal day shifts vary between 12 to 16 hours). Two shifts are based on a 24-hour day average. Per work/rest guidelines, a person **CANNOT** exceed 16 hours in a 24-hour day.

EQUIPMENT INFORMATION INSTRUCTIONS: COMPLETE ALL APPLICABLE BLOCKS FOR EACH PIECE OF EQUIPMENT

#1) EQUIPMENT TYPE (KIND): _____
Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#2) EQUIPMENT TYPE (KIND): _____
Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#3) EQUIPMENT TYPE (KIND): _____
Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#4) EQUIPMENT TYPE (KIND): _____
Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#5) EQUIPMENT TYPE (KIND): _____
Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION (see size information table provided): _____

#6) EQUIPMENT TYPE (KIND): _____
Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____

SIZE INFORMATION: _____

#7) EQUIPMENT TYPE (KIND): _____

Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#8) EQUIPMENT TYPE (KIND): _____

Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#9) EQUIPMENT TYPE (KIND): _____

Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#10) EQUIPMENT TYPE (KIND): _____

Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#11) EQUIPMENT TYPE (KIND): _____

Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

#12) EQUIPMENT TYPE (KIND): _____

Indicate Number of Operators you will provide: None 1 operator for one shift 2 operators for 2 shifts Not applicable
YEAR: _____ MAKE: _____ MODEL: _____
SERIAL NUMBER: _____ VEHICLE ID NO: _____ LICENSE NO: _____
SIZE INFORMATION: _____

SIZE INFORMATION: Use this information to complete the Equipment Information section. Please see the *Interagency Incident Business Management Handbook, Chapter 20* located at <http://www.fs.fed.us/r1/fire/nrcg/agree-contract/equip.html> for specification requirements.

TYPE OF EQUIPMENT	SIZE MEASUREMENT
Dozer	Flywheel horsepower
Skidder	Flywheel horsepower
Grader	Flywheel horsepower
Lowboy	Tons
Backhoe	Nominal digging depth <u>and</u> flywheel horsepower
Excavator	Weight class in lbs with thumb <u>and</u> flywheel horsepower
Feller Buncher	Flywheel horsepower
Sedan	Must be mid-size or larger
Passenger Van	GVW in lbs <u>and</u> include # of seatbelts
Pickup	4X2 or 4X4 <u>and</u> compact, or ½ or ¾ or 1Ton
Utility-SUV	4X2 or 4X4 <u>and</u> compact, or ½ or ¾ or 1Ton
Truck, Stakeside, Stock	GVW in lbs <u>and</u> platform length in feet
Gray Water Truck	Gallons
Shop Truck	“Heavy” or “Automotive/light”
Fuel Truck	Gallons