



# SADDLE INCIDENT

CA-BTU-013655

OPERATIONAL PERIOD

SATURDAY SEPTEMBER 10<sup>TH</sup> 0700


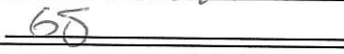
to

SUNDAY SEPTEMBER 11<sup>TH</sup> 0700

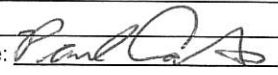




## INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> Saddle CA-BTU-013655	<b>2. Operational Period</b> <table style="width: 100%; border: none;"> <tr> <td style="border: none;">Date From:</td> <td style="border: none;">9/10/2016</td> <td style="border: none;">Date To:</td> <td style="border: none;">9/11/2016</td> </tr> <tr> <td style="border: none;">Time From:</td> <td style="border: none;">0700</td> <td style="border: none;">Time To:</td> <td style="border: none;">0700</td> </tr> </table>	Date From:	9/10/2016	Date To:	9/11/2016	Time From:	0700	Time To:	0700												
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<b>3. Objective(s):</b>																					
<u>Management Objectives</u> <ul style="list-style-type: none"> <li>-Provide for and maintain public and emergency responder safety by utilizing the incident safety analysis process.</li> <li>-Provide for timely and accurate release of incident information to the public, media, first responders and cooperators.</li> <li>-Protect and defend structures and improvements in the fire area.</li> <li>-Protect natural and cultural reasources in the fire area.</li> <li>-Provide a process to manage emergency reasources efficiently.</li> <li>-Ensure costs are minimized appropriately for the values at risk.</li> <li>-Ensure coordination and communications with stakeholders and cooperating agencies.</li> </ul>																					
<u>Control Objectives</u> <ul style="list-style-type: none"> <li>-Keep the fire south of Wilderness Way.</li> <li>-Keep the fire east of Pentz Road.</li> <li>-Keep the fire west of Nelson Bar Road.</li> <li>-Keep the fire north of Lime Saddle Road.</li> </ul>																					
<b>General Situational Awareness:</b> <ul style="list-style-type: none"> <li>- MAINTAIN L.C.E.S. AT ALL TIMES. Safety zones and escape routes are mandatory.</li> <li>- Ensure all personnel maintain situational awareness.</li> <li>- Rolling material and steep terrain. Rember to maintain good footing.</li> <li>- Keep your hydration up by drinking water and electrolyte beverages. Avoid energy drinks.</li> <li>- Maintain good communications with your supervisors, adjacent forces and crew members.</li> <li>- Guard against complacency.</li> </ul>																					
<b>5. Site Safety Plan Required?</b> Yes ___ No <u>X</u>																					
<b>Approved Site Safety Plan(s) Located at:</b>																					
<b>6. Incident Action Plan</b> <table style="width: 100%; border: none;"> <tr> <td style="border: none;">X ICS 203</td> <td style="border: none;">ICS 215A</td> <td style="border: none;">Phone List</td> <td style="border: none;">Fire Suppression Repair Plan</td> </tr> <tr> <td style="border: none;">X ICS 204</td> <td style="border: none;">ICS 220</td> <td style="border: none;">Training Message</td> <td style="border: none;">Off Site Lodging Message</td> </tr> <tr> <td style="border: none;">X ICS 205</td> <td style="border: none;">X Travel Map</td> <td style="border: none;">X Base Map</td> <td style="border: none;">Documentation Message</td> </tr> <tr> <td style="border: none;">X ICS 206</td> <td style="border: none;">X Weather Forecast</td> <td style="border: none;">X Demob Plan</td> <td style="border: none;">X ICS 214</td> </tr> <tr> <td style="border: none;">X Safety Message</td> <td style="border: none;">Fire Behavior</td> <td style="border: none;">Finance Message</td> <td style="border: none;">X CAL FIRE 101</td> </tr> </table>		X ICS 203	ICS 215A	Phone List	Fire Suppression Repair Plan	X ICS 204	ICS 220	Training Message	Off Site Lodging Message	X ICS 205	X Travel Map	X Base Map	Documentation Message	X ICS 206	X Weather Forecast	X Demob Plan	X ICS 214	X Safety Message	Fire Behavior	Finance Message	X CAL FIRE 101
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<b>7. Prepared By:</b> Tim Person      Position/Title: PSC      Signature: <u></u>																					
<b>8. Approved by Incident Commander</b> Garrett Sjolund      Signature: <u></u>																					
ICS 202      IAP Page <u>1</u>	Date/Time: 9/9/2016 1900hrs																				

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> Saddle CA-BTU-013655		<b>2. Operational Period: Date From:</b> 9/10/2016 Time From: 0700		<b>Date To:</b> 9/11/2016 Time To: 0700	
<b>3. Incident Commander(s) and Command Staff:</b>			<b>7. Operation Section:</b>		
IC/UC's	Jason Dyer	Chief			
Deputy		Deputy			
Safety Officer		Night Ops			
Information Officer	Mary Ann Aldrich	Staging Area			
Liaison Officer		<b>Branch I</b>		<b>Director:</b>	
LE Liaison Officer		Division/Group		A/X/Y Ed Smith	
		Division/Group			
<b>4. Agency/Organization Representatives:</b>			Division/Group		
CAL FIRE Butte Unit	Garret Sjolund	Division/Group			
Paradise Police	Erick Reinbold	Division/Group			
CHP	Brian McGe	<b>Branch II</b>		<b>Director:</b>	
Butte County Sheriff	Deric Bell	Division/Group		H/M Matt Sisneros / Brin DeSmet (T)	
PG&E	Rob Cone	Division/Group			
CA State Parks		Division/Group			
NAVDAG		Division/Group			
CDCR	Tom Bainbridge	Division/Group			
Oroville CHP		<b>Branch</b>		<b>Director:</b>	
Town of Paradise		Division/Group		Supp Repair Dave Derby	
Butte County EMS		Division/Group			
		Division/Group			
		Division/Group			
		Division/Group			
<b>5. Planning Section:</b>			<b>Branch</b>		<b>Director:</b>
Chief	Tim Person	Division/Group			
Deputy		Division/Group			
Resource Unit	Paul Carlos				
Situation Unit		Staging Area			
Documentation Unit	Joey Panzella	Division/Group			
Demobilization Unit	Jordan Weber	<b>Branch</b>		<b>Director:</b>	
GISS		Division/Group			
FBAN		Division/Group			
IMET		Division/Group			
Training Specialist		<b>Air Operations Branch</b>		<b>Director:</b> Shem Hawkins	
Crew Tech	Timothy Williams	Air Attack Supervisor			
<b>6. Logistics Section</b>			Air Support Supervisor		
Chief	Jesse Morris	Helicopter Coordinator			
Deputy		Helibase Manager			
Supply Unit		<b>8. Finance/Administration Section:</b>			
Facilities Unit	Randy Ford	Chief		Vance Multan	
Ground Support Unit	Craig Sanderson	Deputy			
Hired Equipment Tech		Time Unit			
Communications Unit	Kyle Johnson	Procurement Unit			
Medical Unit		Comp/Claims Unit			
Food Unit		Cost Unit			
Hotel Tech Spech	Matt Aldrich				
<b>Prepared By: Name:</b>	Paul Carlos	RESL	Signature: 		
<b>ICS 203</b>	<b>IAP Page</b> 2	<b>Date/Time:</b>	9/9/2016 1900 hours		











Butte Unit

# Safety Message

## Saddle Fire

CA-BTU-013655 09/10/2016 0700-0700



## HAZARD TREES

Whether as snags or live green trees, these are one of the most common deadly risks encountered on the fire line.

### Environment:

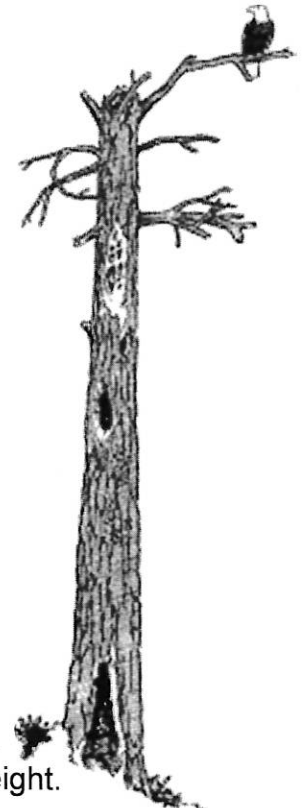
- Anticipated burn-down time.
- Current and forecasted winds.
- Night operations.
- Steep slopes.
- Diseased or bug-kill areas.

### Indicators:

- "Cat-face" at base of tree with active fire.
- Numerous downed trees in area.
- Dead, broken, or burning tops and limbs.
- Accumulation of downed limbs.
- Absence of needles, bark, or limbs – SNAGS!
- Leaning or hung-up.

### Hazard Tree Control and Mitigation:

- First step is to flag out drop zones with **Visible** flagging.
- Notify the Division Sup / all personnel in the area.
- Mitigate the hazard tree with **Qualified** sawyers or heavy equipment.
- Sawyer will establish a secure felling area, minimum of 2 ½ X tree height.
- Post lookouts when felling underway.
- No one shall reenter the felling area until "All Clear" called by the sawyer.
- Keep clear of bucket/retardant drops near trees/snags.
- Reposition firefighters to secure/safe areas in response to high wind forecast.
- Modify suppression tactics or fireline location to avoid high risk areas.



**SITUATIONAL AWARENESS: LOOK UP AND LIVE!**

**Prepared By:** Lou Sciocchetti, Safety Officer

**Approved by:** Garrett Sjolund, Incident Commander

Lookouts

Communications

Escape Routes

Safety Zones

INCIDENT RADIO COMMUNICATIONS PLAN		Incident Name			SADDLE			Date/Time Prepared		Operational Period Date/Time	
								9/9/2016 19:00:00 PM		9/10 - 9/11/2016 0700-0700	
Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq	N or W	RX Tone/NAC	TX Freq	N or W	TX Tone/NAC	Mode	Remarks
1	COMMAND	CDF C7 T2	ALL DIVISIONS	151.4600 N		103.5	159.3900 N		123.0	A	BK GROUP 16 CH 7 (T2)
2											
3	TACTICAL	VFIRE 24	DIVISION A/X/Y	154.2725 N		156.7	154.2725 N		156.7	A	BK GROUP 24 CH 20
4	TACTICAL	VFIRE 25	DIVISION H/M	154.2875 N		156.7	154.2875 N		156.7	A	BK GROUP 25 CH 01
5											
6	TACTICAL	CDF T31	SUP/REPAIR	159.3825 N		192.8	159.3825 N		192.8	A	BK GROUP 20 CH 18
7											
8											
9											
10											
11											
12											
13											
14	AIR TO GRD	CDF A/G T18	ALL DIVISIONS	159.3450 N		192.8	159.3450 N		192.8	A	BK GROUP 20 CH 05
15	EMS	CALCORD	ALL DIVISIONS	156.0750 N		156.7	156.0750 N		156.7	A	BK GROUP 24 CH 11
16	EMERGENCY	GUARD	EMERGENCY	168.6250 N			168.6250 N		110.9	A	EMERGENCY USE ONLY
17											
18											
19											
20	EMERGENCY	GUARD	EMERGENCY	168.6250 N			168.6250 N		110.9	A	EMERGENCY USE ONLY

Prepared By (Communications Unit)

Tim Person 

Incident Location OROVILLE  
 County BUTTE State CA Latitude Longitude

The convention calls for frequency lists to show four digits after the decimal place, followed by either an "N" or a "W", depending on whether the frequency is narrow or wide band. Mode refers to either "A" or "D" indicating analog or digital (e.g. Project 25) or "M" indicating mixed mode. All channels are shown as if programmed in a control station, mobile or portable radio. Repeater and base stations must be programmed with the Rx and Tx reversed.

## MEDICAL PLAN (ICS 206)

<b>1. Incident Name:</b> Saddle CA-BTU-013655	<b>2. Operational Period:</b> 0700-0700	Date From: 9/10/2016 Time From: 0700	Date To: 9/11/2016 Time To: 0700
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<b>3. Medical Aid Stations:</b>			
Name	Location	Contact Number/Freq	Paramedics Yes / No
			Yes / No

<b>4. Transportation (indicate air or ground):</b>			
Ambulance Service	Location	Contact Number	Level of Service
Butte EMS	Paradise	530-538-6460	X ALS / <input type="checkbox"/> BLS
Enloe Flight Care	Chico	530-538-6460	X ALS / <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS / <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS / <input type="checkbox"/> BLS

<b>5. Hospitals:</b>							
Hospital Name	Address, Lat & Long Helipad	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Enloe Medical Center	1531 Esplanade, Chico	530-332-7300	5	30	Level: 2	<input type="checkbox"/> Yes x No	x Yes <input type="checkbox"/> No
Feather River Hospital	5974 Pentz Rd, Paradise	530-872-3378	5	30	Level: 3	<input type="checkbox"/> Yes x No	x Yes <input type="checkbox"/> No
UCD Med Center	2315 Stockton Blvd. Sacramento	916-734-2011	20	2	Level 1	x Yes <input type="checkbox"/> No	x Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: ___	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: ___	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>6. Special Medical Emergency Procedures</b>	
<p><b>Line Emergency</b> Crew Supervisor will contact Division Supervisor with patient complaint/condition and location. - Division Group Supervisor Contacts: 1. Closest EMS resource 2. Communications Unit - Communications Unit Contacts: 1. Ground or Air ambulance as requested. 2. Operations 3. Safety 4. Medical Unit - Division Supervisor or designee will serve as point of contact and run medical emergency on assigned channel. 1. A pre-assigned tactical frequency (i.e. CALCORD) should be used for IWI and only for duration of the emergency. - Communications Unit will clear the Command channel for emergency traffic as needed for duration of the need.</p> <p><b>Camp Emergency</b> Contact Medical Unit with patient complaint/condition and location. Medical staff will respond to stabilize the patient. - Medical Unit contacts 1. Communications 2. Safety 3. Logistics 4. Operations 5. Crew Supervisor 6. Comp/Claims</p>	<p><b>Injury Reporting Procedures</b></p> <p>Nature of Injury: _____          Location of Patient: _____          Point of Contact: _____          Transportation Requested by: Air ___ Ground ___          Point of Pick-Up: _____          Lat: _____ Long: _____          Patient Unit ID: _____          Is an EMT with Patient: Yes _____ No _____          Age: _____ Sex: Male _____ Female _____</p> <p><b>All Emergencies - Secure the area and identified witnesses for later investigation. Keep accurate log of events.</b></p>

Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

<b>7. Prepared by (Medical Unit Leader):</b> Name: Jorden Weber	Signature:
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<b>8. Approved by (Safety Officer):</b> Name: Tim Person	Signature:
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ICS 206	IAP Page _____	Date/Time: 9/9/2016	2100
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# DEMOB

SADDLE INCIDENT

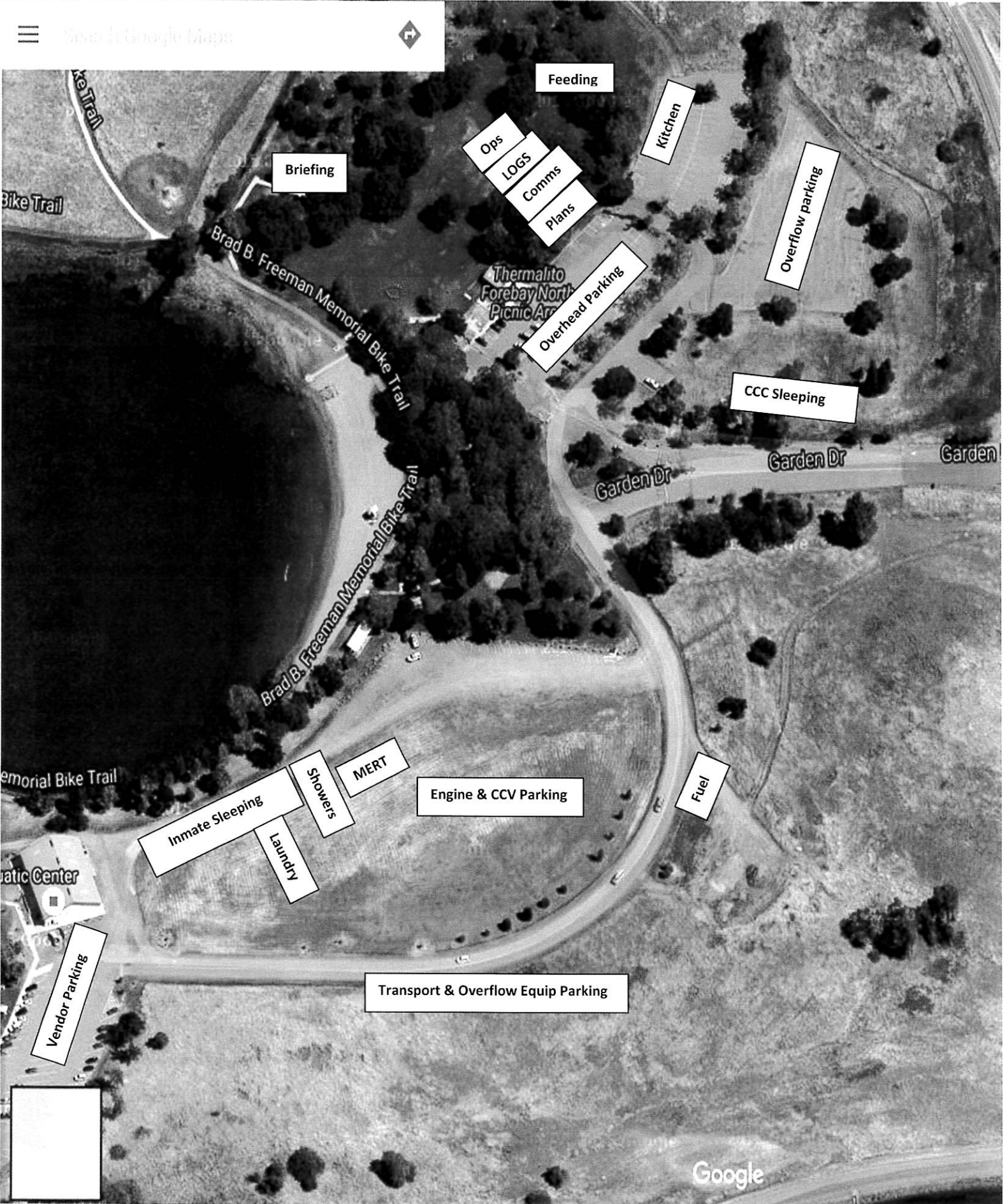
CA – BTU – 013655

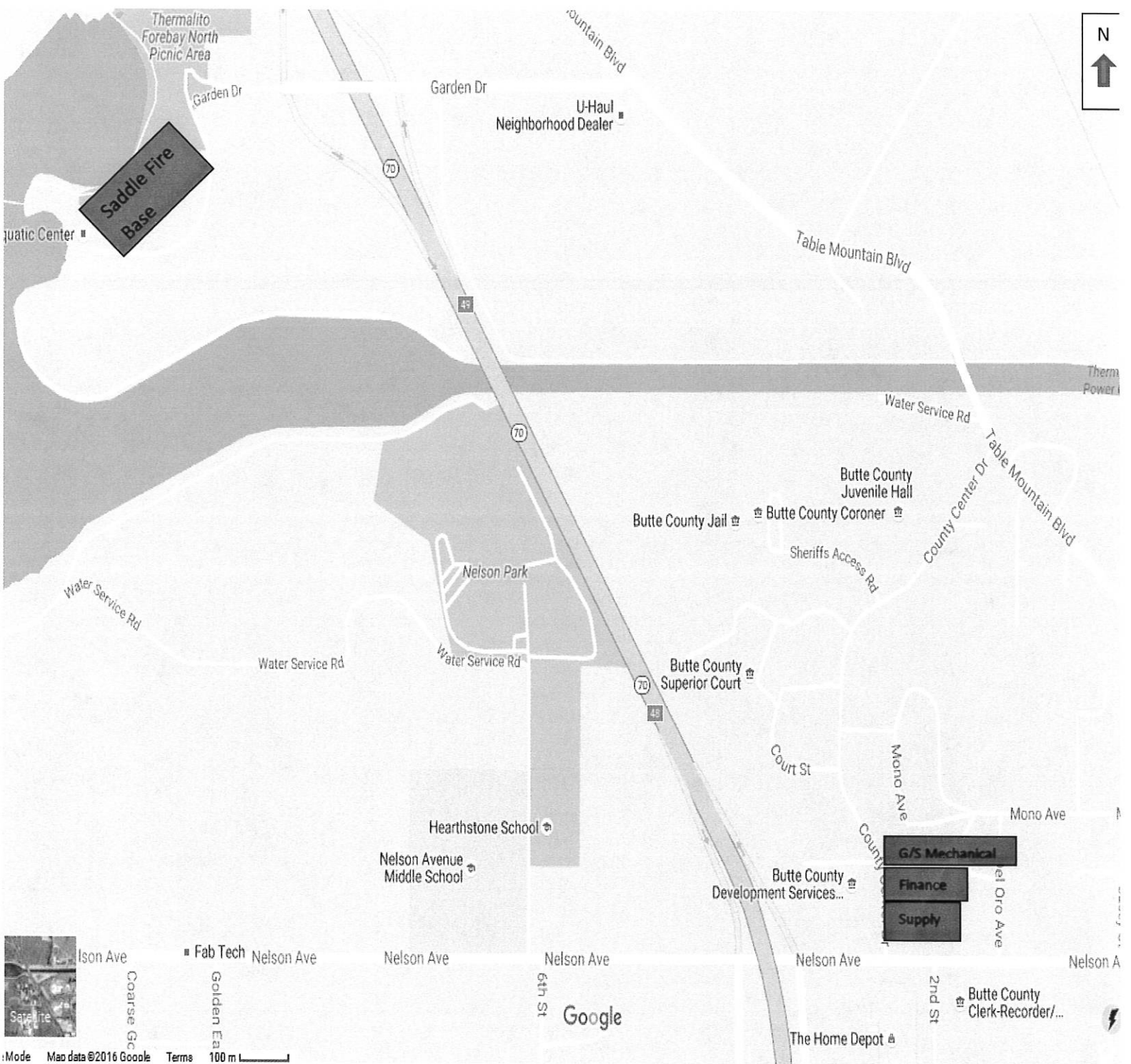
- Resources must Check-In prior to the Demob process.
- In order to be deemed excess, supervisors must submit an ICS #213 to the Resources Unit.
- Resources report to Demob at the times posted on the tentative Demob list, which is posted around the Incident Base.
- Prior to reporting to Demob, Please return all supplies and equipment.
- Resources will get signatures from the following units:
  - Motels
  - Supply
  - Ground Support
  - Documentation
  - Time
  - Demob

## **Archaeological and Historical Sites Fireline Guidance for the Saddle Incident**

**Do not compromise safety for the protection and preservation of archaeological and historical sites. When feasible and prudent:**

1. Be on the lookout for prehistoric and historic sites. Prehistoric archaeological sites include temporary camps containing scatters of obsidian and/or chert flakes that often look like broken glass. More permanent village sites containing circular depressions (house pits), artifact scatters, and dark brown-black soils (midden). These typically occur on flats near sources of water, along ridgetops and saddles, and other such places suitable for camping. Historic sites include old wooden buildings, structures and corrals, rock foundations, wells, and debris scatters. These kinds of resources can be found in the same kinds of environmental settings as prehistoric camp sites.
2. No archaeological or historical sites have yet been flagged. If you observe artifacts, features, or sites, attempt to avoid dozing or driving through and/or parking on these sites, if feasible, especially with heavy equipment.
3. If you can't avoid sites, minimize disturbance as much as feasible, only clearing the surface to as minimal a depth and width as necessary.
4. Leave all artifacts in place. Some artifacts may have been intentionally placed for religious or ceremonial reasons.
5. When a site is discovered, flag it for visibility and report its location to the Division Supervisor. If feasible, note locations of discovered resources on a map. Better yet, take a GPS reading. Leave information with the Plans Section so that the sites can be relocated and protected during both the suppression and fire suppression repair phases of the Incident.
6. If you encounter a burial or other human remains, cease work in that area immediately and contact the CAL FIRE Archaeologist. State law requires that CAL FIRE then contact the County Coroner, who will then determine if the remains are part of a crime scene. If the Coroner determines that the remains are Native American, State law requires the Coroner to contact the Native American Heritage Commission in Sacramento.





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STATE OF CALIFORNIA  
 DEPARTMENT OF FORESTRY AND FIRE PROTECTION  
**PROPERTY CERTIFICATION OF LOCATION OR DAMAGE**  
**CERTIFICATE OF RESPONSIBILITY FOR INCIDENT OCCURRENCE**  
 CAL FIRE-101 page 1 of 2 (1/07)

**NOTE: This form must not be used to certify lost, stolen or worn out property. A STD 152 Property Survey Report must be completed.**

DOC. NUMBER:

LOCATION / INCIDENT NAME:	INCIDENT NUMBER:	UNIT:	REGION:	DATE:
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THE FOLLOWING ARTICLES WERE: (broken, left on line, damaged, or other)	DATE OF OCCURRENCE:
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QUANTITY	UNIT OF MEAS.	CAL FIRE STOCK NUMBER (COMPLETE WHENEVER ASSIGNED)	DESCRIPTION <small>(INDICATE SIZE, MAKE, MODEL, TYPE, ETC., TO CLEARLY DESCRIBE THE ITEM, PROVIDE ADEQUATE DATA TO EFFECTIVELY IDENTIFY EQUIPMENT OR PROPERTY.)</small>	PROPERTY NUMBER

LOCATION OF ITEMS:

REMARKS:

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**SIGNATURE OF PERSON CERTIFYING OCCURRENCE AS DESCRIBED**

SIGNATURE:	PRINTED NAME:	TITLE:	DATE:
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**UNIT SUPERVISOR'S APPROVAL**

COMMENTS:

SIGNATURE OF UNIT ADMINISTRATOR:	TITLE:	DATE:
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# CAL FIRE

## INCIDENT MANAGEMENT TEAM

### WATER USAGE PLAN

#### *California Drought Emergency*

The following shall be considered and implemented by all fire resources as a means to provide maximum efficiencies when utilizing water resources, while minimizing the impacts to private and public water supplies. Accountability shall be maintained for all water supplies that are utilized and care should be applied to ensure proper replacement and/or reimbursement to the supplier/ owner.

#### **Fireline personnel-** (During mop up operations)

- Use of Pencil Hose and Garden Nozzles with Shut-Offs.
- Use of Back pumps.
- Dry Mop-up and consolidation of heavy fuels to areas where they can burn out safely
- Locate/ Relocate Firelines to lighter fuels or natural barriers when safe.
- Set up and use portable tanks in anticipation of longer transport times for Water Tenders.
- Use of foams, gels and other water enhancers.
- Evaluate need to mop up in excess of 200 feet from fireline

#### **Road Maintenance and Repair-**

- Monitor and water roads only when and where needed.
- Water when most effective (evening and nights).
- Use chemical treatments when available (Magchloride, Omni bind etc).
- Consider use of tertiary or treated water (sp)

#### **Aviation Operations-**

- Use of Gels, Foams and Retardants. Set up portable plants.
- Consider Blivits and Pencil hose for interior mop up operations as opposed to numerous bucket drops.
- Establish and use pre-use agreements for existing and known water sources.
- Use large watershed dip sites when able. Minimize use of small, static ponds and lakes.
- Maintain accountability of water used and locations of dip sites.
- Evaluate need for interior bucket drops

#### **Private Water Supplies-**

- Notify property owner as early as possible.
- Minimize usage and develop alternative water supplies when and where appropriate.
- Track usage (meter, 214 form) and develop a plan to replace water.
- Make arrangements for reimbursement and damage claims if needed.

#### **Public/ Municipal Water Supplies-**

- Notify Agency as soon as possible and request a representative to the incident.
- Identify fill areas and request metering devices. Place on incident map.
- Use alternative or reclaimed water sources when available. Place on incident map.
- Make arrangements for reimbursement and damage claims if needed.

#### **Management and Supervision-**

- Use leaders intent and consider establishing Water Conservation as a Management Objective.
- Consider complexity of water use on incidents. Consider establishing a Water Supply Group Supervisor to coordinate additional resources to support the incident needs.
- Complete the Water Usage Report daily and turn in to Finance
- Review this check list and brief daily.

# CAL FIRE INCIDENT MANAGEMENT TEAM WATER USAGE LOG

DATE: \_\_\_\_\_

Division / Group: \_\_\_\_\_

AGENCY ID / VENDOR: \_\_\_\_\_

i.e.. Strike Team 1110C, Acme Water Tenders

REQUEST # \_\_\_\_\_

**TURN INTO FINANCE DAILY**

WATER SOURCE LOCATION	Hydrant	Open source i.e. pond	Tank	Gallons Used	Property Owner / Contact Number if known **

**\*\*Please note if you made contact with property owner and their contact.  
(Use reverse side if needed.)**

Information: \_\_\_\_\_

The intent of this document is intended to track, record and validated the amount of water used on a incident. It's not intended to review the performance of equipment using the water on an incident.



