

WALL INCIDENT CA-BTU-010975 INCIDENT ACTION PLAN



OPERATIONAL PERIOD

7/8/2017 0700

to

7/9/2017 0700



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: <p style="text-align: center;">WALL</p>	2. Operational Period: <table style="width: 100%; border: none;"> <tr> <td style="border: none;">Date From:</td> <td style="border: none;">7/8/2017</td> <td style="border: none;">Date To:</td> <td style="border: none;">7/9/2017</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:	7/8/2017	Date To:	7/9/2017	Time From:	0700	Time To:	0700												
Date From:	7/8/2017	Date To:	7/9/2017																		
Time From:	0700	Time To:	0700																		
3. Objective(s): <u>Management Objectives</u> -Provide for emergency personnel and public safety at all times. -Protect property, improvements, and infrastructure. -Ensure coordinated, timely and accurate release of public information. -Foster and maintain relationships with all cooperators and stakeholders. -Protect economic, natural, cultural and heritage resources. -Maintain fiscal accountability and keep costs commensurate with values at risk. <u>Control Objectives</u> -Keep the fire East of Oroville Bangor Hwy -Keep the fire South of Hwy 162 - Forbestown Rd -Keep the fire West of Robinson Mill Rd -Keep the fire North of La Port Rd																					
General Situational Awareness: Steep and rugged terrain with difficult access. Active area for fire history. Wildland Urban Interface/ Intermix threat. Narrow roads and limited access.																					
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Approved Site Safety Plan(s) Located at:																					
6. Incident Action Plan <table style="width: 100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> ICS 203</td> <td><input checked="" type="checkbox"/> ICS 215A</td> <td><input type="checkbox"/> Phone List</td> <td><input type="checkbox"/> Fire Suppression Repair Plan</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 204</td> <td><input checked="" type="checkbox"/> ICS 220</td> <td><input type="checkbox"/> Training Message</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205</td> <td><input checked="" type="checkbox"/> Incident Map</td> <td><input checked="" type="checkbox"/> Travel Map</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 206</td> <td><input checked="" type="checkbox"/> Weather Forecast</td> <td><input type="checkbox"/> Demob Plan</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 208</td> <td><input type="checkbox"/> Fire Behavior</td> <td><input type="checkbox"/> Finance Message</td> <td><input checked="" type="checkbox"/> ICS 214</td> </tr> </table>		<input checked="" type="checkbox"/> ICS 203	<input checked="" type="checkbox"/> ICS 215A	<input type="checkbox"/> Phone List	<input type="checkbox"/> Fire Suppression Repair Plan	<input checked="" type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 220	<input type="checkbox"/> Training Message	<input type="checkbox"/>	<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Incident Map	<input checked="" type="checkbox"/> Travel Map	<input type="checkbox"/>	<input checked="" type="checkbox"/> ICS 206	<input checked="" type="checkbox"/> Weather Forecast	<input type="checkbox"/> Demob Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/> ICS 208	<input type="checkbox"/> Fire Behavior	<input type="checkbox"/> Finance Message	<input checked="" type="checkbox"/> ICS 214
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7. Prepared By: Joe Tapia/Chris Post	Position/Title: PSC Signature:																				
8. Approved by Incident Commander:	Russ Fowler/Brian Estes Signature: _____																				
ICS 202																					

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: WALL		2. Operational Period: Date From: 7/8/2017 Time From: 0700		Date To: 7/9/2017 Time To: 0700	
3. Incident Commander(s) and Command Staff:			7. Operation Section:		
IC/UC's	Russ Fowler/Brian Estes	Chief	Tony Brownell/Mike Blankenheim		
Deputy	Jeff Veik/Ron Myers/Jim Ferguson	Deputy	Mike Webb		
Safety Officer	Joe Buchmeier	Night Ops	Tim Ernst		
Information Officer	Mary Ann Aldrich/Jonathan Cox	Staging Area	Swedes		
Liaison Officer	Mitch Villalpando	Branch	I	Kevin Patton	
		Division/Group	A		
		Division/Group	C		
		Division/Group	P		
4. Agency/Organization Representatives:					
Agency/Organization	Name	Division/Group			
BCSO	Derek Bell	Division/Group			
CHP	Cliff Morrison	Branch	II	Bill Lopez, Brian Knoll (T)	
PGE	Rob Cone	Division/Group	H		
Yuba Co SO		Division/Group	L		
		Division/Group			
		Staging Area	Forbestown		
		Division/Group			
		Branch			
		Division/Group			
		Division/Group			
		Branch			
		Division/Group			
		Division/Group			
		Division/Group			
5. Planning Section:					
Chief	Joe Tapia/Chris Post	Branch			
Deputy	Adam Mitchell/Buddy Bloxham	Division/Group			
Resource Unit	David Scheurich/Jim Irving/Leonel Plata	Division/Group			
Situation Unit	Robert Clark	Division/Group			
Documentation Unit		Branch			
Demobilization Unit	Tom Shevenell	Division/Group			
GISS	Tom Knecht	Division/Group			
FBAN	Tim Chavez	Division/Group			
IMET		Division/Group			
Training Tech Spec	Claudia Soiza	Staging Area			
		Air Operations Branch	Director:	Scott Packwood	
6. Logistics Section			Air Support Grp Sup Tom Swanson		
Chief	Stephanie Edson/Dusty Martin	Helibase Manager	Scott Corn		
Deputy	Eddy Moore				
Supply Unit	Amber Henderson	8. Finance/Administration Section:			
Facilities Unit	Steve Dohman	Chief	Shawn Hogan	Deputy: John Kiszka	
Ground Support Unit	Jason Wardon	Time Unit	Andrew Corpuz		
Hired Equipment Tech	Jason Luckenbach	Procurement Unit	Jason McDermot		
Communications Unit	John Brooks	Comp/Claims Unit	Joe Tapia		
Medical Unit	Jorge Segura	Cost Unit	Greg Belk		
Motel Tech Spec	Jacob Tomsich				
Prepared By: Name:	Joe Tapia/Chris Post	Position/Title:	PSC	Signature: _____	
ICS 203		Date/Time:	7/7/2017 2300 hours		

SPOT FORECAST 901 PM PDT Fri Jul 7 2017

FNUS76 KSTO 080401
FWSSTO

SPOT FORECAST for Wall...CAL FIRE
National Weather Service SACRAMENTO CA
901 PM PDT Fri Jul 7 2017

Forecast is based on request time of 2100 PDT on July 07.
If conditions become unrepresentative...contact the National Weather Service.

.DISCUSSION...

Dry and hot conditions over the fire site. Temperatures will gradually cool from the 100's to the 80's by midnight. Northwest winds will diminish through the evening and become light and northeasterly after 10 pm. Overnight discoveries will be poor. East winds Saturday and Sunday morning's will shift to west to southwest by afternoon with speeds generally less than 10 mph. Hot temperatures and low relative humidity will again prevail.

.SATURDAY...

Sky/weather.....Sunny.
Max temperature.....100-105.
Min humidity.....7-12 percent.
Wind (20 ft).....
Slope/valley.....East winds 4 to 8 mph shifting to the
West 5 to 10 mph in the afternoon.
mph in the afternoon.
Ridgetop.....Southwest 5 mph.
CWR.....0 percent.
LAL.....1.

.SATURDAY NIGHT...

Sky/weather.....Clear.
Min temperature.....72-76.
Max humidity.....40-45 percent.
Wind (20 ft).....
Slope/valley.....East winds 4 to 8 mph.
Ridgetop.....Northwest 5 to 10 mph.
CWR.....0 percent.
LAL.....1.

.SUNDAY...

Sky/weather.....Sunny.
Max temperature.....98-103.
Min humidity.....10-14 percent.
Wind (20 ft).....
Slope/valley.....East 5 mph becoming
southwest 5 to 10 mph in the afternoon.
Ridgetop.....Southwest 5 to 10 mph.
CWR.....0 percent.
LAL.....1.

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SAFETY MESSAGE

WALL INCIDENT



1. Incident Name: WALL	2. Operational Period: Date From:0708/17 Time From:07:00	Date To:07/09/17 Time To:07:00
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JULY HAS SIGNIFICANT ACCIDENT HISTORY, SLOW DOWN AND PLAN ACCORDINGLY

- With the light flashy fuels burn injuries are more of a problem this year, don't rely on your PPE for full protection, if you feel the heat you might already be burned.
- Stay aware of what is happening around you and adapt your exit strategy accordingly.
- ESTABLISH: LOOKOUTS, COMMUNICATIONS, ESCAPE ROUTES AND SAFETY ZONES.
- Radio frequencies will be changing, follow the communications plan and clone when available.
- No PPE allowed in the eating areas. Wash hands regularly and always before entering the eating areas.
- If personnel get fatigued, but it's not a medical emergency, use line medics for evaluation and rehab in a shaded area on the fire line.

IF IT'S PREDICTABLE IT'S PREVENTABLE

4. Site Safety Plan Required? Yes No
Approved Site Safety Plan(s) Located At: N/A

5. Prepared by: Name: _Buchmeier/Janssen_ Position/Title: _SOF1/SOF1(T)_ Signature: _____

ICS 208

Date/Time: July 7, 2017/22:00

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/08/17 Date To: 07/09/17 Time From: 0700 Time To: 0700			3. Branch: I Div/Group: A <p style="text-align: center;">Alpha</p>		
4. Operations Personnel: Operations Section Chief: Tony Brownell/Mike Blankenheim Night Ops: Tim Ernst Branch Director: Kevin Patton Division/Group Supervisor:							
5. Resources Assigned:							
Resource Identifier		Leader	Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Time Location		
STC KNF 3600C			1 / 1	E-42	0700-0700		
STG RCC 9273G		KING, MARTIN	1 / 1	C-17	0700-0700		
W/T PVT E-39			1 / 1	E-39	0700-0700		
W/T PVT E-40			1 / 1	E-40	0700-0700		
6. Work Assignments: Build and improve fireline. Defend structures as needed.							
7. Special Instructions:							
8. Communications (radio and/or phone contact numbers needed for this assignment):							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
BUTTE SUPPORT	1	COMMAND	154.415	123.0	159.000	123.0	T2-Sunset, T5-St John, T13-Bloomer
VFIRE 24	2	TACTICAL	154.2725	156.7	154.2725	156.7	
CDF T18	15	TACTICAL	159.3450	192.8 (T16)	159.3450	192.8 (T16)	AIR TO GROUND
CALCORD	16	MEDICAL	156.0750	156.7	156.0750	156.7	EMERGENCY USE ONLY
9. Prepared by: Name: David Scheurich/Jim Irving Pos/Title: RESL ICS 204 Date/Time: 7/7/2017 2300 hours Signature: _____							

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <b style="text-align: center;">WALL		2. Operational Period: Date From: 07/08/17 Date To: 07/09/17 Time From: 0700 Time To: 0700				3. Branch: <b style="text-align: center;">I Div/Group: <b style="text-align: center;">C <b style="text-align: center;">Charlie	
4. Operations Personnel: Operations Section Chief: Tony Brownell/Mike Blankenheim Night Ops: Tim Ernst Branch Director: Kevin Patton Division/Group Supervisor:							
5. Resources Assigned:						Reporting Location, Special Equipment, Remarks, Notes, and Information Time Location	
Resource Identifier		Leader	Number of Personnel	Request #			
STC NEU 9233C		Griffis, Sean	1 / 1	E-5	0700-0700		
STC SHF CA-SHF - 3675C		Younger, Elizabeth	1 / 1	E-7	0700-0700		
STG MEU 9113G		Sentak, Dave	1 / 1	C-2	0700-0700		
STG TGU 9275G		AGUSTIN, JOSH J	1 / 1	C-13	0700-0700		
CRW BFC1		DeLong, Shannon	1 / 1	C-3	0700-0700		
CRW BFC2		Alderman, Brian K	1 / 1	C-4	0700-0700		
W/T PVT E-16			1 / 1	E-16	0700-0700		
W/T PVT E-36			1 / 1	E-36	0700-0700		
STG+							
STL+							
STL+							
6. Work Assignments:							
7. Special Instructions: Build and improve fireline. Defend structures as needed.							
8. Communications (radio and/or phone contact numbers needed for this assignment):							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
BUTTE SUPPORT	1	COMMAND	154.415	123.0	159.000	123.0	T2-Sunset, T5-St John, T13-Bloomer
CDF T26	2	TACTICAL	159.2925	192.8 (T16)	159.2925	192.8 (T16)	
CDF T18	15	TACTICAL	159.3450	192.8 (T16)	159.3450	192.8 (T16)	AIR TO GROUND
CALCORD	16	MEDICAL	156.0750	156.7	156.0750	156.7	EMERGENCY USE ONLY
9. Prepared by: Name:		David Scheurich/Jim Irvinç		Pos/Title: RESL		Signature: _____	
ICS 204		Date/Time: 7/7/2017		2300 hours			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: WALL		2. Operational Period: Date From: 07/08/17 Date To: 07/09/17 Time From: 0700 Time To: 0700				3. Branch: I Div/Group: P Papa	
4. Operations Personnel: Operations Section Chief: Tony Brownell/Mike Blankenheim Night Ops: Tim Ernst Branch Director: Kevin Patton Division/Group Supervisor:							
5. Resources Assigned:							
Resource Identifier	Leader	Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information			
STC BTU 9211C	Needles, Garrett	1 / 1	E-82	0700-0700	Time Location		
STC CZU 9171 C		1 / 1	E-83	0700-0700			
STG LMU 9227 G	Luetke, Bryan	1 / 1	C-11	0700-0700			
STG TGU 9257G	Hannan, Jake	1 / 1	C-1	0700-0700			
W/T PVT E-35		1 / 1	E-35	0700-0700			
W/T PVT E-34		1 / 1	E-34	0700-0700			
W/T PVT E-33		1 / 1	E-33	0700-0700			
W/T PVT E-32		1 / 1	E-32	0700-0700			
STL+							
STL+							
6. Work Assignments: Build and improve fireline. Defend structures as needed.							
7. Special Instructions:							
8. Communications (radio and/or phone contact numbers needed for this assignment):							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
BUTTE SUPPORT	1	COMMAND	154.415	123.0	159.000	123.0	T2-Sunset, T5-St John, T13-Bloomer
CDF T28	5	TACTICAL	151.1825	192.8 (T16)	151.1825	192.8 (T16)	
CDF T18	15	TACTICAL	159.3450	192.8 (T16)	159.3450	192.8 (T16)	AIR TO GROUND
CALCORD	16	MEDICAL	156.0750	156.7	156.0750	156.7	EMERGENCY USE ONLY
9. Prepared by: Name: David Scheurich/Jim Irving Pos/Title: RESL Signature: _____							
ICS 204		Date/Time: 7/7/2017		2300 hours			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/08/17 Date To: 07/09/17 Time From: 0700 Time To: 0700				3. Branch: II Div/Group: L <p style="text-align: center;">Lima</p>	
4. Operations Personnel: Operations Section Chief: Tony Brownell/Mike Blankenheim Night Ops: Tim Ernst Branch Director: Bill Lopez, Brian Knoll (T) Division/Group Supervisor:							
5. Resources Assigned:					Reporting Location, Special Equipment, Remarks, Notes, and Information Time Location		
Resource Identifier	Leader	Number of Personnel	Request #				
CRW SHASTA LAKE IHC	Barber, Charles R	1 / 1	C-6		0700-0700		
STC XNE 4100C	Carson, Clint	1 / 1	E-88		0700-0700		
STC XSA 4151C	Rowell, Forrest F	1 / 1	E-90		0700-0700		
STG LMU 9226 G	Veverka, Robert	1 / 1	C-5		0700-0700		
CRW MENDOCINO IHC		1 / 1	C-9		0700-0700		
W/T PVT E-21		1 / 1	E-21		0700-0700		
W/T PVT E-23		1 / 1	E-23		0700-0700		
W/T PVT E-24		1 / 1	E-24		0700-0700		
W/T PVT E-25		1 / 1	E-25		0700-0700		
STL+							
STL+							
6. Work Assignments: Build and improve fireline. Defend structures as needed.							
7. Special Instructions:							
8. Communications (radio and/or phone contact numbers needed for this assignment):							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
BUTTE SUPPORT	1	COMMAND	154.415	123.0	159.000	123.0	T2-Sunset, T5-St John, T13-Bloomer
CDF T27	4	TACTICAL	159.3075	192.8 (T16)	159.3075	192.8 (T16)	
CDF T18	15	TACTICAL	159.3450	192.8 (T16)	159.3450	192.8 (T16)	AIR TO GROUND
CALCORD	16	MEDICAL	156.0750	156.7	156.0750	156.7	EMERGENCY USE ONLY
9. Prepared by: Name: David Scheurich/Jim Irving Pos/Title: RESL Signature: _____							
ICS 204		Date/Time: 7/7/2017		2300 hours			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/08/17 Date To: 07/09/17 Time From: 0700 Time To: 0700				3. Branch: Staging Swedes																																																																															
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AIR OPERATIONS SUMMARY OPERATIONAL PERIOD DATE: 07/08/2017 START: 0617 END: 0807 SUNRISE: 0547 SUNSET: 0837

1. INCIDENT NAME: Wall	2. PREPARED BY: Shem Hawkins	PREPARED DATE/TIME: 2300 7/8/2017	3. # OF COPIES NEEDED:
4. REMARKS (Safety Notes, Hazards, Air Operations Special Equipment, etc.): TFR may not be staffed with aerial supervision. Make blind calls at 7 and 12 miles prior to entering the TFR GPS settings: hddd°mm.mmm' with WGS 84 selected as the map datum. Ensure an accurate log of all water is maintained, including GPS coordinates to each dip site.			5. TFR: Center: Radial Latitude: 39 27.833 Longitude: 121 22..483 Radius: 5 Miles Altitude: From the surface up to and including 6000 feet MSL

6. PERSONNEL	7. FREQUENCIES	8. FIXED WING
	Phone	# Avail / Type/ Make-Model / FAA N# / Base(s)
AOBD:		AIRTANKERS
ASGS: Shem Hawkins	530-990-5128	
	AIR/AIR FW:	LEADPLANES
	168.7375	
	AIR/AIR RW:	AIR TACTICAL PLATFORMS
	122.2750	TBD
	AIR BRIEFING	TFR Freqs.
	122.2750	122.275
ATGS:	AIR/GROUND TACTICAL	
HEBM (t): Sean Preader	707-217-6779	
HEBM (t): Gary Lane	530-559-3807	
	DECK:	
	168.350	
	TOLC:	
	123.025	
HLCO:	COMMAND:	PILOT MAP:
	See IAP for command	
	Air Guard	
	168.625 Tone 1	
Dispatch Aircraft Desk		

9. HELICOPTERS (Use Additional Sheets as Necessary)

FAA N#	TY	MAKE/MODEL	BASE	AVAIL	START	REMARKS	FAA N#	TY	MAKE/MODEL	BASE	AVAIL	START	REMARKS
C205	2	UH1H	KOVE	0700	0730	Suppression-Hoist							
301	3	Long Ranger	KOVE	0700	0730	Recon-Helco							
6CK	1	S61	KOVE	0700	0730	Suppression							
5TH	1	KMAX	KOVE	0700	0730	Suppression							

10. TASK/MISSION/ASSIGNMENT (Use ICS-220a if additional space needed; Type/Function includes: Air Tactical, Retardant, Recon, Personnel Transport, Water Dropping, etc.)

TYPE/FUNCTION	NAME OF PERSONNEL OR CARGO (if applicable) OR INSTRUCTIONS FOR TACTICAL AIRCRAFT	MISSION START	FLY FROM	FLY TO
Recon				
Water Drops/Retard.				
Personnel Transport				
Logistics				

MEDICAL PLAN (ICS 206)

1. Incident Name: <div style="text-align: center; font-size: 1.2em;">WALL</div>	2. Operational Period: Date From: <u>7/8/17</u> Date To: <u>7/9/17</u> Time From: <u>0700</u> Time To: <u>0700</u>
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3. Medical Aid Stations:			
Name	Location	Contact Number/Freq	Paramedics

4. Transportation (Indicate air or ground):			
Ambulance Service	Location	Contact Number	Level of Service

5. Hospitals:							
Hospital Name	Address,	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	Helipad
	Lat & Long Helipad		Air	Ground			
Oroville Hosp	2767 Olive Hwy, Oroville, CA 95966	(530) 533-8500	5	25	Level 3	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
Enloe Med Ctr	1531 Esplanade Chico, CA 95926	(530) 332-7300	20	55	Level 2	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
University of California- Davis Medical Center	2315 Stockton Blvd. Sacramento	916-734-2011	40	100	Level 1	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes

6. Special Medical Emergency Procedures	
Line Emergency 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. Camp Emergency 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	Injury Reporting Procedures 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 ___ All Emergencies - Secure the area and identified witnesses for later investigation. Keep accurate log of events.

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

7. Prepared by (Medical Unit Leader): Name:	Signature:
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8. Approved by (Safety Officer): Name:	Signature:
ICS 206	Date/Time:

ICS 205 - INCIDENT RADIO COMMUNICATIONS PLAN

1. Incident Name: <p style="text-align: center;">WALL</p>			2. Date/Time Prepared Date: 07/07/2017 Time: 1830			3. Operational Period: Date From: 07/08/17 Date To: 07/09/17 Time From: 0700 Time To: 0700		
4. Communications								
Ch#	Function	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
1	COMMAND	BUTTE SUPPORT	COMMAND	154.4150	123.0	159.000	123.0	T2-Sunset, T5-St John, T13-Bloomer
2	TACTICAL	VFIRE 24	DIV A/C	154.2725	156.7	154.2725	156.7	
3	TACTICAL	CDF T26	DIV H	159.2925	192.8 (T16)	159.2925	192.8 (T16)	
4	TACTICAL	CDF T27	DIV L	159.3075	192.8 (T16)	159.3075	192.8 (T16)	
5	TACTICAL	CDF T28	DIV P	151.1825	192.8 (T16)	151.1825	192.8 (T16)	
6								
7								
8								
9								
10								
11								
12								
13								
14								
15	TACTICAL	CDF T18	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	AIR TO GROUND
16	MEDICAL	CALCORD	EMERGENCY	156.0750	156.7	156.0750	156.7	EMERGENCY USE ONLY
17								
18								
19								
20	EMERGENCY	CALCORD	EMERGENCY	168.6250	0.0	156.0750	156.7	EMERGENCY USE ONLY
5. Special Instructions								
6. Prepared by (Communications Unit Leader): Name: Scott Gamba NBIMT						Signature: _____		
ICS 205						Date/Time: 07/07/17 1830		

UNIT LOG (ICS 214)

1. Incident Name: Wall **2. Operational Period:** Date From: 7/8/17 Date To: 7/9/17
Time From: 0700 Time To: 0700

3. Unit Name/Designators **4. Unit Leader (Name and ICS Position)**

5. Personnel Assigned/Designators		
NAME	ICS POSITION	HOME BASE

6. Activity Log (Continue on Reverse)	
TIME	MAJOR EVENTS

7. Prepared By: **Date/Time:**