

*** CORRECTED ***

**WALL
INCIDENT
CA-BTU-010975**

INCIDENT ACTION PLAN



OPERATIONAL PERIOD

7/9/2017 0700

to


7/10/2017 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;">7/9/2017</td> <td style="border: none;">Date To:</td> <td style="border: none;">7/10/2017</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:	7/9/2017	Date To:	7/10/2017	Time From:	0700	Time To:	0700												
Date From:	7/9/2017	Date To:	7/10/2017																		
Time From:	0700	Time To:	0700																		
3. Objective(s): <u>Management Objectives</u> <ul style="list-style-type: none"> - 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> <ul style="list-style-type: none"> - Keep the fire East of Oroville Bangor Hwy - Keep the fire South of Lake Oroville - Keep the fire West of Robinson Mill Road - Keep the fire North of La Porte Road 																					
General Situational Awareness: Steep and rugged terrain with difficult access. Extensive fire history in the area. 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 checked="" 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 checked="" type="checkbox"/> Fire Behavior</td> <td><input checked="" 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 checked="" 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 checked="" type="checkbox"/> Fire Behavior	<input checked="" type="checkbox"/> Finance Message	<input checked="" type="checkbox"/> ICS 214
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<input checked="" type="checkbox"/> ICS 208	<input checked="" type="checkbox"/> Fire Behavior	<input checked="" type="checkbox"/> Finance Message	<input checked="" type="checkbox"/> ICS 214																		
7. Prepared By: Chris Post	Position/Title: PSC Signature:																				
8. Approved by Incident Commander: ICS 202	Jim Ferguson Signature:																				

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: WALL		2. Operational Period: Date From: 7/9/2017 Time From: 0700		Date To: 7/10/2017 Time To: 0700	
3. Incident Commander(s) and Command Staff:			7. Operation Section:		
IC/UC's	Brian Estes	Chief	Mike Blankenhelm		
Deputy	Jeff Veik/Ron Myers/Jlm Ferguson	Deputy	Mike Webb		
Safety Officer	Joe Buchmeler	Night Ops	Tim Ernst		
Information Officer	Mary Ann Aldrich/Jonathan Cox	Staging Area	Swedes	Edward Boontier	
Liaison Officer	Mitch Villalpando	Branch	I	LANZAS/JENSEN (T)	
Law Tech Spec	John Davis	Division/Group	A	Brandon Lanning	
		Division/Group	C	Gus Boston	
		Division/Group	P	Jason Deyher	
		Division/Group			
		Division/Group			
4. Agency/Organization Representatives:					
Agency/Organization	Name	Division/Group			
BCSO	Derek Bell	Division/Group			
CHP	Cliff Morrison	Branch	III	RAPP	
PG&E	Rob Cone	Division/Group	E		
Ca. State Parks	Travis Gee	Division/Group	G		
CHP Oroville	Al Sanders	Division/Group			
Cal OES	Ken Hood	Staging Area	Forbestown	Josh Ramey	
Cal OES Law	Troy Clegg	Division/Group			
NVADG	Norm Rosene	Branch	V	JEFF OHS	
Butte Co. EOC	Shari McCracken	Division/Group	H	Kim Fullingim	
Wildfire Defense Sys	Mark Shipman	Division/Group	L	Keith Cummings	
Red Cross	Dave Willoughby	Division/Group			
BC Animal Control	Ryan Soulsby	Division/Group			
		Division/Group			
		Branch			
5. Planning Section:			Division/Group		
Chief	Chris Post	Division/Group			
Deputy	Adam Mitchell / Buddy Bloxham	Division/Group			
Resource Unit	G. Garcia / D. Scheurich / L. Plata	Division/Group			
Situation Unit	Robert Clark	Division/Group			
Documentation Unit		Branch			
Demobilization Unit	Jim Irving	Division/Group			
GISS	Tom Knecht	Division/Group			
FBAN	Tim Chavez	Division/Group			
IMET		Division/Group			
Training Tech Spec	Claudla 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 Tornsich				
Prepared By: Name:	Buddy Bloxham	Position/Title:	PSC	Signature:	
ICS 203		Date/Time:	7/8/2017 2300 hours		

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 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: Mike Blankenhelm Night Ops: Tim Ernst Branch Director: Jeff Ohs Division/Group Supervisor: Brandon Lanning							
5. Resources Assigned:							
Resource Identifier	Leader	Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Time Location			
WWT PVT E-39		1	E-39	0700-0700			
WWT PVT E-40		1	E-40	0700-0700			
SOFR O-80	Alforque, Mike	1	O-80	0700-0700			
FEMP							
STC 9233C STA 4804A CRW PVT C-41 Diamond Fire C-41 CRW PVT C-35 Diamond Fire C-35 CRW PVT C-37 Tom Ferry C-37 CRW PVT C-38 Tom Ferry C-38 STRAVER 9232G GRIFFIN E-5 STA XAL 2003A BAKER E-255							
6. Work Assignments: Build and improve fireline. Defend structures as needed. Mop Up 50'							
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
BT SP 2	1	COMMAND	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET
VFIRE 24	7	TACTICAL	154.2725	156.7	154.2725	156.7	
CALCORD	15	MEDICAL	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
GUARD	16	EMERGENCY	168.6250	0.0	168.6250	110.9	EMERGENCY USE ONLY
9. Prepared by: Name: Gabe Garcia Pos/Title: RESL ICS 204 Date/Time: 7/8/2017 2300 hours Signature: <i>Gabe Garcia</i>							

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700				3. Branch: I Div/Group: C Charlie		
4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Jeff Ohs Division/Group Supervisor: Gus Boston MAT BARNES (G)								
5. Resources Assigned:						Reporting Location, Special Equipment, Remarks, Notes, and Information Time Location		
Resource Identifier	Leader	Number of Personnel	Request #					
STC XSH 3150C	Varnum, Chris	20	E-27	0700-0700				
STC SHU 9242C	Lowe, Kenny L	18	E-122	0700-0700				
STC XCO 3025C	Davalos, Jaime	20	E-8	0700-0700				
ENG BTU 2181		3		0700-0700				
STG MEU 9113G	Sentak, Dave	33	C-2	0700-0700				
STG SHU 9241G	Furia, James	33	C-8	0700-0700				
CRW BFC1	Delong, Shannon	16	C-3	0700-0700				
CRW BFC2	Alderman, Brian K	16	C-4	0700-0700				
CRW MENDOCINO IHC*	Lopez, Manuel	19	C-9	0700-1900				
STL AEU 9278 L	Grandbios, Doug	6	E-73	0700-0700				
DOZ LMU 2242	Stevenson, Norm	2	E-4	0700-0700				
DOZ NEU 2346		2		0700-0700				
W/T - 27		1		0700-0700				
W/T Humphreys		1		0700-0700				
W/T E-52		1		0700-0700				
W/T PVT E-16		2	E-16	0700-0700				
W/T PVT E-26 DEMOB		2	E-36	0700-0700				
HEQB O-184	Woessner	1	O-184	0700-0700				
FOBS		1		0700-0700				
6. Work Assignments: Build and improve fireline. Defend structures as needed.								
7. Special Instructions:								
*12 Hr Resource								
8. Communications (radio and/or phone contact numbers needed for this assignment):								
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes	
BT SP 2	1	COMMAND	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET	
CDF T26	8	TACTICAL	159.2925	192.8 (T16)	159.2925	192.8 (T16)		
CALCORD	15	MEDICAL	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION	
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)		
GUARD	16	EMERGENCY	168.6250	0.0	168.6250	110.9	EMERGENCY USE ONLY	
9. Prepared by: Name:		Gabe Garcia		Pos/Title: RESL		Signature: _____		
ICS 204		Date/Time: 7/8/2017		2300 hours				

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700				3. Branch: I Div/Group: C <p style="text-align: center;">Charlie</p>																																																																																																																							
4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Jeff Ohs Division/Group Supervisor: Gus Boston <i>MATT BARACKS (T)</i>						Page 2 of 2																																																																																																																							
5. Resources Assigned: <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">Resource Identifier</th> <th style="width: 15%;">Leader</th> <th style="width: 15%;">Number of Personnel</th> <th style="width: 15%;">Request #</th> <th style="width: 20%;">Reporting Location, Special Equipment, Remarks, Notes, and Information</th> </tr> </thead> <tbody> <tr><td><i>DOZ 1741</i></td><td></td><td></td><td></td><td></td></tr> <tr><td><i>DOZ 2241</i></td><td></td><td></td><td></td><td></td></tr> <tr><td><i>DOZ PVT E-31</i></td><td></td><td></td><td></td><td></td></tr> <tr><td><i>DOZ PVT E-67</i></td><td></td><td></td><td></td><td></td></tr> <tr><td><i>DOZ PVT E-68</i></td><td></td><td></td><td></td><td></td></tr> <tr><td><i>HERB 0-187</i></td><td><i>NIEDERBERGER</i></td><td></td><td></td><td></td></tr> <tr><td><i>HERB (T) 0-190</i></td><td><i>URRUTIA</i></td><td></td><td></td><td></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>				Resource Identifier	Leader	Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information	<i>DOZ 1741</i>					<i>DOZ 2241</i>					<i>DOZ PVT E-31</i>					<i>DOZ PVT E-67</i>					<i>DOZ PVT E-68</i>					<i>HERB 0-187</i>	<i>NIEDERBERGER</i>				<i>HERB (T) 0-190</i>	<i>URRUTIA</i>																																																																																				Reporting Location, Special Equipment, Remarks, Notes, and Information Time Location	
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4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Jeff Ohs Division/Group Supervisor: Jason Deyher <i>BRANCH SAFETY: DARRIN McMillion</i> <i>MIKE CONATY (T)</i>							
5. Resources Assigned:							
Resource Identifier	Leader	Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Location			
STC OES 4801C	Shurr, Brett C	1	E-26	0700-0700			
STC				0700-0700			
STC				0700-0700			
ENG NEU 2386		3		0700-0700			
STG TGU 9257G	Hannan, Jake	1	C-1	0700-0700			
STG				0700-0700			
STG				0700-0700			
CRW SHASTA LAKE IHC*	Barber, Charles R	19	C-6	0700-1900			
STL HUU 9128L		4	E-2	0700-0700			
W/T PVT E-32		1	E-32	0700-0700			
W/T PVT E-37		1	E-37	0700-0700			
W/T PVT E-61		1	E-61	0700-0700			
<i>W/T E-33</i>							
<i>STC 2141 C</i>							
<i>STA 4805 A</i>							
<i>STG HUU 9125 G</i>							
<i>HEAR 0-188</i>	<i>ABUJERA</i>		<i>C-45</i> <i>0-188</i>				
6. Work Assignments: Build and improve fireline. Defend structures as needed.							
7. Special Instructions:							
* 12 Hour Resource							
8. Communications (radio and/or phone contact numbers needed for this assignment):							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
BT SP 2	1	COMMAND	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET
CDF T27	9	TACTICAL	159.3075	192.8 (T16)	159.3075	192.8 (T16)	
CALCORD	15	MEDICAL	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
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1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700				3. Branch: III Div/Group: E Echo	
4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Division/Group Supervisor: JAMES CRABTREE, BRIAN HAM (LT), MAHEBENESET							
5. Resources Assigned:							
Resource Identifier		Leader		Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information <small>Time Location</small>	
ENG BTC 366							
ENG BTC 87							
ENG BTC 217D							
ENG BTC 218Z							
DOZ PVT E-7L							
DIVS TITUS 0-59							
DIVS KLEVA 0-166							
DIVS PATTEAM 0-167							
DIVS RALEY 0-164							
6. Work Assignments:							
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
BT SP 2	1	COMMAND	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET
CDF T28	10	TACTICAL	151.1825	192.8 (T16)	151.1825	192.8 (T16)	
CALCORD	15	MEDICAL	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
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9. Prepared by: Name: Gabe Garcia Pos/Title: RESL Signature: <i>Gabe Garcia</i> ICS 204 Date/Time: 7/8/2017 2300 hours							

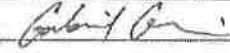
ASSIGNMENT LIST (ICS 204)

1. Incident Name: WALL		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700				3. Branch: III Div/Group: G Golf	
4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Division/Group Supervisor: <i>JAMES ALLEN</i>							
5. Resources Assigned:			Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information		
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Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
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NIFC T7	11	TACTICAL	168.2500		168.2500		
CALCORD	15	MEDICAL	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
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9. Prepared by: Name: Gabe Garcia		Pos/Title: RESL		Signature: <i>Gabe Garcia</i>			
ICS 204		Date/Time: 7/8/2017		2300 hours			

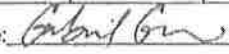
ASSIGNMENT LIST (ICS 204)

1. Incident Name: WALL		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700				3. Branch: V Div/Group: H Hotel	
4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Division/Group Supervisor: Kim Fullingim							
5. Resources Assigned:							
Resource Identifier	Leader	Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Location			
DOZ BTU 2142		2		0700-0700			
DOZ PVT E-65		2	E-65	0700-0700			
W/T PVT E-71		2		0700-0700			
W/T PVT E-45		2		0700-0700			
W/T PVT E-38		2	E-38	0700-0700			
W/T PVT E-41		2	E-41	0700-0700			
FEMP		1		0700-0700			
SOFR	McMillin, Darren	1		0700-0700			
SIC 4055C							
STA 4203A							
DOZ E-141 (PVT)							
DOZ PVT E-70							
CRW PVT C-33		OC FORESTRY					
CRW PVT C-34		THOMAS					
CRW PVT C-32		ERR INDUSTRIES					
6. Work Assignments: Build and improve fireline. Defend structures as needed. Mop up 50'							
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
BT SP 2	1	COMMAND	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET
NIFC T6	12	TACTICAL	166.7750		166.7750		
CALCORD	15	MEDICAL	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
GUARD	16	EMERGENCY	168.6250	0.0	168.6250	110.9	EMERGENCY USE ONLY
9. Prepared by: Name: Gabe Garcia Pos/Title: RESL Signature:							
ICS 204		Date/Time: 7/8/2017		2300 hours			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: WALL		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700				3. Branch: V Div/Group: L Lima	
4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Division/Group Supervisor: Keith Cummings							
5. Resources Assigned:						Reporting Location, Special Equipment, Remarks, Notes, and Information Location	
Resource Identifier	Leader	Number of Personnel	Request #				
STC SHF 3675C*	Younger, Elizabeth	27	E-7		0700-1900		
STC KNF 3600C*	Stoner, Harris	26	E-42		0700-1900		
STC					0700-0700		
STG LMU 9226 G	Veverka, Robert	33	C-5		0700-0700		
STG MEU 9114G	Bryner, Dean	33	C-7		0700-0700		
STG					0700-0700		
STG					0700-0700		
STL SCU 9161L*	Mullis, Dean	2	E-69		0700-1900		
DOZ BTU 2140		2			0700-0700		
W/T PVT 74		2			0700-0700		
W/T PVT 25		2			0700-0700		
W/T PVT 64		2			0700-0700		
STC 4250L							
STA 2250A							
DOZ PVT E-64							
DOZ PVT E-111							
DOZ PVT E-271							
6. Work Assignments: Build and improve fireline. Defend structures as needed.							
7. Special Instructions:							
* 12 Hour Resource							
8. Communications (radio and/or phone contact numbers needed for this assignment):							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
BT SP 2	1	COMMAND	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET
NIFC T5	13	TACTICAL	166.7250		166.7250		
CALCORD	15	MEDICAL	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
GUARD	16	EMERGENCY	168.6250	0.0	168.6250	110.9	EMERGENCY USE ONLY
9. Prepared by: Name: Gabe Garcia		Pos/Title: RESL		Signature: 			
ICS 204		Date/Time: 7/8/2017		2300 hours			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700				3. Branch: Staging Forbestown																																																																																																																						
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9. Prepared by: Name: Gabe Garcia Pos/Title: RESL Signature:  ICS 204 Date/Time: 7/8/2017 2300 hours																																																																																																																												

ASSIGNMENT LIST (ICS 204)

1. Incident Name: <p style="text-align: center;">WALL</p>		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700				3. Branch: Staging Olive	
4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Division/Group Supervisor:							
5. Resources Assigned:							
Resource Identifier	Leader	Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information			
WT PVT E-35				Time	Location		
WT PVT E-34							
WT PVT E-216							
6. Work Assignments:							
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
BT SP 2	1	COMMAND	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET
#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
CALCORD	15	MEDICAL	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
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9. Prepared by: Name: Gabe Garcia Pos/Title: RESL Signature: _____							
ICS 204		Date/Time: 7/8/2017		2300 hours			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: WALL		2. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700			3. Branch: Staging Swedes		
4. Operations Personnel: Operations Section Chief: Mike Blankenheim Night Ops: Tim Ernst Branch Director: Division/Group Supervisor: Edward Boontjer							
5. Resources Assigned:				Number of Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information	
Resource Identifier		Leader	Time			Location	
FALM O-196*			2	O-196	0700-1900		
FALM O-197*			2	O-197	0700-1900		
6. Work Assignments: Maintain 3 minute response time.							
7. Special Instructions:							
*12 Hr Resource							
8. Communications (radio and/or phone contact numbers needed for this assignment):							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
BT SP 2	1	COMMAND	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET
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9. Prepared by: Name: Gabe Garcia Pos/Title: RESL Signature: <i>Gabe Garcia</i>							
ICS 204		Date/Time: 7/8/2017		2300 hours			



SAFETY MESSAGE

WALL INCIDENT



1. Incident Name: WALL	2. Operational Period: Date From: 07/09/17 Time From: 07:00	Date To: 07/10/17 Time To: 07:00
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JULY HAS SIGNIFICANT ACCIDENT HISTORY SLOW DOWN AND PLAN ACCORDINGLY

- With the abundance of light flashy fuels, burn injuries have increased this year. Do Not rely on your PPE for complete protection. If you feel the heat, you might already be burned.
- Stay aware of what is happening around you at all times. 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 feeding areas. Wash hands regularly and always before entering the eating areas.
- If personnel become fatigued, but does not a constitute a medical emergency, use fireline paramedics for evaluation and rehab in a shaded area.
- Be cautious of any marijuana grows in the areas you are working.


IF IT'S PREDICTABLE, IT'S PREVENTABLE!

4. Site Safety Plan Required? Yes No

5. Prepared by: Name(s): Buchmeier/Janssen, Position/Title: SOF1/SOF1(T), Signature(s):

ICS 208

Date/Time: July 8, 2017/21:00

1. Incident Name: Wall		2. Incident Number: CABTU10975
3. Date/Time Prepared: Date: 07/08/17 Time: 1400		4. Operational Period: Date From: 07/09/17 Date To: 07/10/17 Time From: 0700 Time To: 0700
5. Incident Area	6. Hazards/Risks	7. Mitigations
ALL	STEEP TERRAIN	- POST LOOKOUTS - WATCH FOOTING - ADJUST OPERATIONS
ALL	NARROW ONE WAY ROADS	- HEADLIGHTS ON - SLOW DOWN
ALL	FATIGUE	- MAINTAIN PROPER WORK REST CYCLES - DOCUMENT ON ICS-214
ALL	HYDRATION	- MAINTAIN 3 WATERS TO 1 ELECTROLYTE RATIO
ALL	CRITICAL FUEL MOISTURES	- PAY CLOSE ATTENTION TO FIRE BEHAVIOR AND CHANGING CONDITIONS
ALL	IN CAMP CIVILIAN PEDESTRIAN TRAFFIC	- MAINTAIN FIVE MPH SPEED LIMIT IN CAMP
ALL	AVIATION HAZARDS	- MONITOR AIR TO GROUND
ALL	HIRED EQUIPMENT	- PROVIDE PROPER SUPERVISION PER CAL FIRE POLICY
ALL	DROUGHT STRESSED TREES	- MAINTAIN SITUATIONAL AWARENESS
ALL	COMMUNICATIONS	- FOLLOW THE COMM PLAN - BE SURE TO CLONE RADIOS
BASE / HOTELS	SECURITY AT INCIDENT BASE & HOTELS	- PLACE SECURITY AT ENTRANCE & EXITS, PLUS TWO ROAMING IN ICP REMOVE VALUABLES FROM VEHICLES @ HOTELS
8. Prepared by: Joe Buchmeier SOF1, Josh Janssen SOF 1 (T)		
ICS 215A		

FNUS76 KSTO 082347
FWSSTO

SPOT FORECAST for WALL...CAL FIRE
National Weather Service SACRAMENTO CA
447 PM PDT Sat Jul 8 2017

Forecast is based on request time of 2100 PDT on July 08.
If conditions become unrepresentative...contact the National Weather
Service.

.DISCUSSION...

Hot and dry conditions will continue at the wildfire tonight into
Sunday. Sunday should be a bit less hot than Saturday. Overnight
humidity recoveries will remain to be poor to moderate. Easterly
or drainage winds overnight should turn to west or upslope during
afternoon heating.

.SUNDAY...

Sky/weather.....Sunny.
Max temperature.....98-103.
Min humidity.....8-13 percent.
Wind (20 ft).....
Slope/valley.....East winds 1 to 4 mph becoming southwest 3 to
7 mph after 1000.
Ridgetop.....East winds 1 to 4 mph becoming southwest 5 to
10 mph with gusts to 15 mph after 1000.
Mixing height.....Less than 500 ft AGL increasing to 5000 ft AGL
in the afternoon.
Transport winds.....East winds 1 to 4 mph becoming southwest 5 to
10 mph after 1000.
CWR.....0 percent.
LAL.....1.

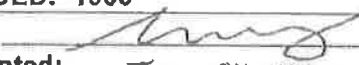
.SUNDAY NIGHT...

Sky/weather.....Clear.
Min temperature.....69-74.
Max humidity.....40-45 percent.
Wind (20 ft).....
Slope/valley.....Southwest winds 3 to 7 mph shifting to the
east 1 to 4 mph after 2200.
Ridgetop.....Southwest winds 5 to 10 mph shifting to the
east up to 5 mph after 2200.
Mixing height.....4900 ft AGL decreasing to 300-2200 ft AGL early
in the evening.
Transport winds.....Southwest winds 3 to 7 mph shifting to the
east 3 to 5 mph after 2200.
CWR.....0 percent.
LAL.....1.

\$\$

Forecaster...CS
Requested by...Tim Chavez
Type of request...WILDFIRE

FIRE BEHAVIOR FORECAST

FORECAST NUMBER: 1	TYPE OF FIRE: WILDFIRE
FIRE NAME: WALL	OPERATIONAL PERIOD: JULY 9, 2017 24 HOUR
DATE ISSUED: JULY 8, 2017	TIME ISSUED: 1900
UNIT: BUTTE UNIT	SIGNED: 
	Typed/printed: Tim CHAVEZ

INPUTS

WEATHER SUMMARY:
NEAR RECORD HIGH TEMPERATURES AND LOW HUMIDITY. LONG DAYLIGHT PERIOD. SEE SPOT FORECAST ATTACHED.

OUTPUTS

FIRE BEHAVIOR

GENERAL: BANGOR RAW (BRUSH FUEL MODEL) ERC 33, BI 44, 1000 HOUR FM = 10%, 100 HOUR FM=6%, 10 HOUR FM=4% FINE DEAD FUEL MOISTURE = 2%.
AVG ANNUAL RAINFALL 35", 2017 RAINFALL 50.75"
SUNRISE 0537, SUNSET 2037, 15 HOURS DAYLIGHT. PROBABILITY OF IGNITION NEAR 100% DURING DAYLIGHT HOURS. FUELS VERY RECEPTIVE TO SPOTTING. MUCH OF THE FIRE IS WITHIN THE SWEDES FIRE PERIMETER FROM 2013. HEAVY LOADING OF FINE FUELS AND MANY DEAD STANDING AND DOWN LARGE DIAMETER FUELS INSIDE THE OLD BURN AREA. POTENTIAL SPOTTING DISTANCE 0.2-0.3 MILES.

SPECIFIC:

BRANCH I

MUCH OF THE BRANCH IS INSIDE THE SWEDES FIRE OF 2013, GRASS FUEL LOADING IS ESPECIALLY HEAVY. SPOTTING ACROSS HONCUT CREEK IN DIVISION P COULD ALLOW A SLOPE REVERSAL FIRE RUN UPHILL TOWARD STONY OAKS LOOP. DOWN CANYON WINDS AT NIGHT AFFECT THIS AREA.

BRANCH III

HEAVIER FUELS HAVE SOME AREAS OF FULL CANOPY COVER OF OAKS AND GRAY PINE WITH FREQUENT DEAD AND DOWN JACKPOTS UNDER THE CANOPY. BRUSH FUELS HAVE HEAVY DEAD COMPONENT. AFTER 1700 FIRE ACTIVITY INCREASES AND STRONG RUNS TO THE NORTH ARE POSSIBLE.

BRANCH V

SMOLDERING IN HEAVY FUELS WILL LAST SEVERAL DAYS. CROWNS OF TREES SO FAR HAVE BEEN FIRE RESISTANT. OAKS AND GRAY PINES MAY HOLD FIRE IN DEAD BRANCHES IN THE CROWNS.


AIR OPERATIONS:

NO SMOKE OR VISIBILITY PROBLEMS ANTICIPATED AFTER 1300.

SAFETY

- STANDING DEAD SNAGS AROUND THE 2013 SWEDES BURN COULD CAUSE SPOTFIRES IF NOT FELLED NEAR THE LINE AND COULD FALL WITH NO WARNING
- ABUNDANT FINE FUELS ARE A COMMON DENOMINATOR OF FATAL AND NEAR MISS FIRES
- JULY 9 IS THE 64TH ANNIVERSARY OF THE RATTLESNAKE FIRE ON THE MENDOCINO FOREST. A STRONG COASTAL INFLUENCE AT DUSK RESULTED IN 15 FATALITIES.

ICS 205 - INCIDENT RADIO COMMUNICATIONS PLAN

1. Incident Name: WALL		2. Date/Time Prepared Date: 07/08/2017 Time: 1830		3. Operational Period: Date To: 07/10/17 Time To: 0700				
4. Communications								
Ch#	Function	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
1	COMMAND	BT SP 2	ALL DIVS	154.4150	123.0	159.0000	123.0	BTU SUPPORT T2-SUNSET
2	COMMAND	BT SP 5	ALL DIVS	154.4150	123.0	159.0000	146.2	BTU SUPPORT T5-ST. JOHN
3	COMMAND	BT SP13	ALL DIVS	154.4150	123.0	159.0000	141.3	BTU SUPPORT T13-BLOOMER
4								
5								
6								
7	TACTICAL	VFIRE 24	DIV A	154.2725	156.7	154.2725	156.7	
8	TACTICAL	CDF T26	DIV C	159.2925	192.8 (T16)	159.2925	192.8 (T16)	
9	TACTICAL	CDF T27	DIV P	159.3075	192.8 (T16)	159.3075	192.8 (T16)	
10	TACTICAL	CDF T28	DIV E	151.1825	192.8 (T16)	151.1825	192.8 (T16)	
11	TACTICAL	NIFC T7	DIV G	168.2500		168.2500		
12	TACTICAL	NIFC T6	DIV H	166.7750		166.7750		
13	TACTICAL	NIFC T5	DIV L	166.7250		166.7250		
14	AIR TO GROUND	CDF T18	ALL DIVS	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
15	MEDICAL	CALCORD	ALL DIVS	156.0750	156.7	156.0750	156.7	MEDICAL COORDINATION
16	EMERGENCY	GUARD	EMERGENCY	168.6250	0.0	168.6250	110.9	EMERGENCY USE ONLY
17								
18								
19								
20	EMERGENCY	GUARD	EMERGENCY	168.6250	0.0	168.6250	110.9	EMERGENCY USE ONLY
5. Special Instructions								
6. Prepared by (COML): Name: John Brooks CQML IMT#5			Signature: 					
ICS 205			Date/Time: 07/08/17 1830					

MEDICAL PLAN (ICS 206)

1. Incident Name: <p style="text-align: center; font-size: 1.2em;">WALL</p>		2. Operational Period: Date From: 7/9/17 Date To: 7/10/17 Time From: 0700 Time To: 0700					
3. Medical Aid Stations:							
Name	Location	Contact Number/Freq	Paramedics				
MERT	ICP	530-310-4921	<input type="checkbox"/> No				
4. Transportation (Indicate air or ground):							
Ambulance Service	Location	Contact Number	Level of Service				
Butte County EMS	Sweets Flats Rd/Oro Bangor	530-332-7050	ALS				
5. Hospitals:							
Hospital Name	Address, Lat & Long Helipad	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	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.				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 _____			
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. Compl/Claims				All Emergencies - Secure the area and identified witnesses for later investigation. Keep accurate log of events.			
<input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.							
7. Prepared by (Medical Unit Leader): Name: Jorge Segura MEDL/IMT8				Signature:			
8. Approved by (Safety Officer): Name: Joe Buchmaler SOF1/IMT6				Signature:			
ICS 206		Date/Time: 7/8/2017					

TRAINING SPECIALIST MESSAGE

A Training Specialist is now on the incident.

ALL ASSIGNED TRAINEES

working on position task books will need to register with the Incident Training Specialist in order to receive proper credit for your assignment.

**The Training Specialist is available immediately following the morning Operations Briefing.
Location: Building adjacent to the Stage**

TRAINING SPECIALIST

**Claudia Soiza
Cell-(949)632-7813**

**Incident Trainee/Trainer Data Form
Wall Incident CA-BTU-010975**

Training Specialist: Claudia Soiza 949.632.7813

- All Incident trainees, including those on Firefighting Modules at your earliest opportunity complete this form and see the Training Specialist.
- Prior to or as you process through DEMOB, remember to close your training package. To close your training package bring: 1) A performance rating from your trainer. (ICS 225)
2) Your task book that has as many entries as possible by your Trainer.

Trainee Data

Trainee Name: _____ ICS Trainee Position: _____

Request # (A,C,E, or O): _____ Agency Designator (Ex. CA-RRU): _____

Ordered as Trainee? Y N Priority Trainee ____ Local Forest Trainee ____ IMT Trainee

Date Assigned: _____ Cell / Contact # While on Incident: _____

Training Records Mailed To: (Fire Chief, Training Officer):

Name: _____ Title: _____

Name of Agency/Unit: _____

Agency/Unit Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Trainee Prerequisites

1. Possesses valid Qualification Card or agency certification card? ___Yes ___No

2. Trainee has current position task book issued by home unit? ___Yes ___No

Current Task Book Progress (Circle) 0% 25% 50% 75% 90%

Priority Open Task in PTB (What do you need to accomplish on this incident?)

Trainer/Evaluator Data

Trainer / Evaluator Name: _____ ICS position on fire: _____

Home Unit: _____ Agency Designator (Ex CA-RRU): _____

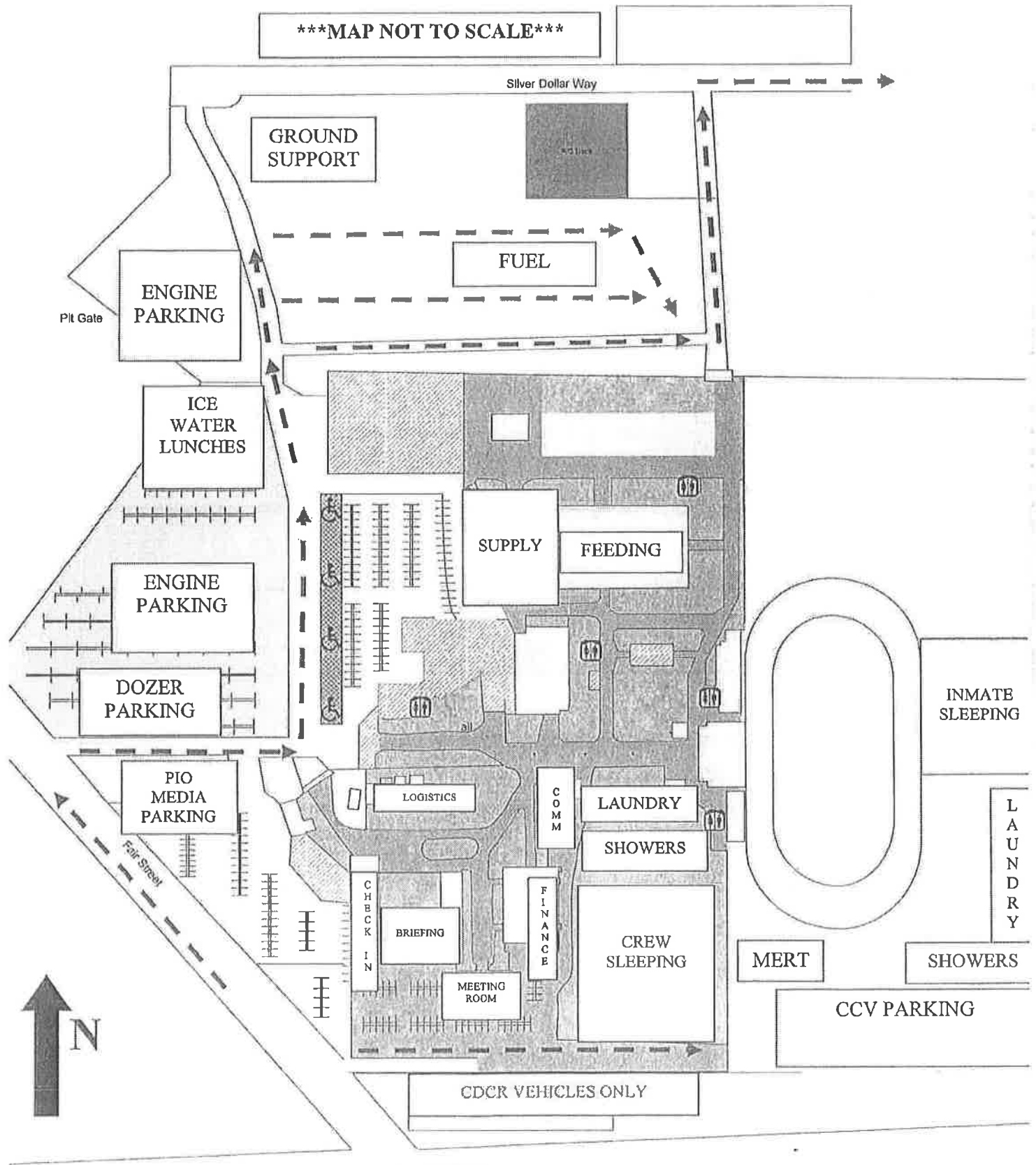
Request # (A,C,E,O): _____

Work Address: _____

City: _____ State: _____ Zip Code: _____

Cell / Contact While on Incident: _____

WALL INCIDENT BASE MAP



FC-33 DAILY UPDATE

DATE:		24 Hrs	12 Hrs												
REQ #	S/T #														
WORK LOCATION:															
RADIO IDS: ST LEADER:	DOZER BLADE HRS	PORTABLE PUMP HRS	# OF SAWS	HRS ON EACH SAW	NOTES										
ENGINE/CREW:															
COMMENTS (ANY CHANGES?):															
CELL PHONE #:															

FC-33 DAILY UPDATE

DATE:		24 Hrs	12 Hrs												
REQ #	S/T #														
WORK LOCATION:															
RADIO IDS: ST LEADER:	DOZER BLADE HRS	PORTABLE PUMP HRS	# OF SAWS	HRS ON EACH SAW	NOTES										
ENGINE/CREW:															
COMMENTS (ANY CHANGES?):															
CELL PHONE #:															

eFC-33 INITIAL INPUT FORM

1 2 3 4 5 6 7

Overhead: complete one form per person.
All Others: complete one form per vehicle.

Request Number

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State Agency	Incident Number	Incident Name	Incident Index Code	Incident PCA Code
CA				

Strike Team	Resource ID - Fire Assignment	Home Station / Office Location
S T	E-3499	PASO ROBLES

YOUR NORMAL DUTY SCHEDULE	24 Hr 8-8 7-7 Other	Portal to Portal? <input checked="" type="checkbox"/>	YOUR AGENCY	HOME UNIT	COMMIT / RELEASE	YOUR CELL PHONE #
<input checked="" type="checkbox"/> One Box			CAL FIRE	S L U		

PERSONNEL	Schedule	First Name	Last Name	Rank or Classification	# of Regular Duty Scheduled Hours per Day									
					Mon	Tue	Wed	Thu	Fri	Sat	Sun			
EMPLOYEE 1	A													
EMPLOYEE 2														
EMPLOYEE 3														
EMPLOYEE 4														
EMPLOYEE 5														
EMPLOYEE 6	<input checked="" type="checkbox"/> One Box	Robert	Johnson	FC										

VEHICLE	Schedule	Radio ID	Kind of Vehicle	ID NoX No
VEHICLE 1				
VEHICLE 2				
	<input checked="" type="checkbox"/> One Box	E-3499	FTH	0 2 X 1 2 3
	Chainsaw Quantity:		Portable Pump?	

Put a Dozer and its Transport on a single form. All others, use one form per individual vehicle.



ADDITIONAL INFO

SHIFT TICKET EXAMPLE

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name DOZER DUDE	
Incident or Project Name WALL		Incident Number CABTU 010975	Request Number E#		Operator #1 BOB SMITH	Operator #2 TOM SMITH
Agreement Number XXX - 000000 - 00					Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Equipment Make CAT		Equipment Model / Type D6XM			Operating Supplies Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Serial Number 111111		Licence Number 111111			Equipment Status: <input checked="" type="checkbox"/> Inspected <input checked="" type="checkbox"/> Under Agreement <input type="checkbox"/> Released by Government <input type="checkbox"/> Withdrawn by Contractor	
Equipment Use (Circle) Hours Days / Miles						
Date Mo / Day	Start	Stop	Work	Assignment		
8/3	0700	2400	17	DIV M		
8/4	0001	0700	7	DIV M		
Vendor Rating					Govt. Rep. Name and Position - PRINT Mike Weber	
		Poor*	Avg.	Good	Exc.	N/A
Met Performance Expectations		Vendor Rating must be done.			Govt. Rep. Signature <i>Mike Weber</i>	
Equipment in Safe Working Condition					Contractor Signature <i>Bob Smith</i>	
Operator Skill Level					Date 08/04/15	
Operates Safely					Time 0800	
Operator's Cooperation Level					CAL FIRE 297 (Rev. 3-2011)	
Overall Performance		* NOTE: Any rating of POOR requires an explanation in Comment Section. **Final evaluation or for more documentation, use an ICS Form 230 or equivalent.			Remarks/Comments ** TWO OPERATORS NO DAMAGE/ NO CLAIMS	
Pink - Finance		Blue - Home Unit HE Coordinator		Yellow - Vendor		White - Govt Representative

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name DUDE TRANSPORT	
The responsible Government Officer will complete this form each shift						
Incident or Project Name WALL		Incident Number CABTU 010975	Request Number E # Here		Operator #1 BOB SMITH	Operator #2 TOM SMITH
Agreement Number XXX - 000000 - 00					Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Equipment Make TRANSPORT/ KENWORTH		Equipment Model / Type COZAD TRAILER /26 WHEELS			Operating Supplies Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Serial Number 1XP3ESMP14239012		Licence Number 9999999			Equipment Status: <input checked="" type="checkbox"/> Inspected <input checked="" type="checkbox"/> Under Agreement <input type="checkbox"/> Released by Government <input type="checkbox"/> Withdrawn by Contractor	
Equipment Use (Circle) Hours Days / Miles						
Date Mo / Day	Start	Stop	Work	Assignment		
8/3	0700	2400	17	DIV M		
8/4	0001	0700	7	DIV M		
Vendor Rating					Govt. Rep. Name and Position - PRINT Mike Weber	
		Poor*	Avg.	Good	Exc.	N/A
Met Performance Expectations		Vendor Rating must be done.			Govt. Rep. Signature <i>Mike Weber</i>	
Equipment in Safe Working Condition					Contractor Signature <i>Bob Smith</i>	
Operator Skill Level					Date 08/04/15	
Operates Safely					Time 0800	
Operator's Cooperation Level					CAL FIRE 297 (Rev. 3-2011)	
Overall Performance		* NOTE: Any rating of POOR requires an explanation in Comment Section. **Final evaluation or for more documentation, use an ICS Form 230 or equivalent.			Remarks/Comments ** 2 OPERATORS NO DAMAGE/ NO CLAIMS	
Pink - Finance		Blue - Home Unit HE Coordinator		Yellow - Vendor		White - Govt Representative

Turn shift tickets into Finance.

SHIFT TICKET EXAMPLE

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name H2O DUDE	
Incident or Project Name WALL		Incident Number CABTU 010975	Request Number E or S # Here		Operator #1 BOB SMITH	Operator #2
Agreement Number XXX - 000000 - 00					Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Equipment Make FREIGHTLINER		Equipment Model / Type WATER TENDER 2500 + GAL			Operating Supplies Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Serial Number 1XP3ESMP14239012		License Number 55555555			Equipment Status <input checked="" type="checkbox"/> Inspected <input checked="" type="checkbox"/> Under Agreement <input type="checkbox"/> Released by Government <input type="checkbox"/> Withdrawn by Contractor	
Equipment Use (Circle) Hours Days / Miles					Remarks/Comments ** ONE OPERATOR NO DAMAGE/ NO CLAIMS	
Date Mo / Day	Start	Stop	Work	Assignment		
8/3	0700	1900	12	DIV Z		
8/4	1900	2400	5	OFF SHIFT		
8/4	0001	0700	7	OFFSHIFT		
Vendor Rating					Govt. Rep. Name and Position - PRINT Mike Weber	
					Govt. Rep. Signature <i>Mike Weber</i>	
					Contractor Signature <i>Bob Smith</i>	
					Date 08/04/15 Time 0800	
Met Performance Expectations Equipment in Safe Working Condition Operator Skill Level Operates Safely Operator's Cooperation Level Overall Performance					Poor* Avg. Good Exc. N/A Vendor Rating must be done.	
* NOTE: Any rating of POOR requires an explanation in Comment Section. **Final evaluation or for more documentation, use an ICS Form 230 or equivalent.					CALFIRE 297 (Rev 3-2011)	
Pink - Finance		Blue - Home Unit IHE Coordinator		Yellow - Vendor		White - Govt Representative

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name WATER GUY	
The responsible Government Officer will complete this form each shift						
Incident or Project Name WALL		Incident Number CABTU 010975	Request Number E OR S # Here		Operator #1 BOB SMITH	Operator #2 BILL SMITH
Agreement Number XXX - 000000 - 00					Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Equipment Make PETERBUILT		Equipment Model / Type WATER TENDER 2500 + GAL			Operating Supplies Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Serial Number 1XP3ESMP14239012		License Number 9999999			Equipment Status <input checked="" type="checkbox"/> Inspected <input checked="" type="checkbox"/> Under Agreement <input type="checkbox"/> Released by Government <input type="checkbox"/> Withdrawn by Contractor	
Equipment Use (Circle) Hours Days / Miles					Remarks/Comments ** 2 OPERATORS NO DAMAGE/ NO CLAIMS	
Date Mo / Day	Start	Stop	Work	Assignment		
8/3	0700	2400	17	DIV M		
8/4	0001	0700	7	DIV M		
Vendor Rating					Govt. Rep. Name and Position - PRINT Mike Weber	
					Govt. Rep. Signature <i>Mike Weber</i>	
					Contractor Signature <i>Bob Smith</i>	
					Date 08/04/15 Time 0800	
Met Performance Expectations Equipment in Safe Working Condition Operator Skill Level Operates Safely Operator's Cooperation Level Overall Performance					Poor* Avg. Good Exc. N/A Vendor Rating must be done.	
* NOTE: Any rating of POOR requires an explanation in Comment Section. **Final evaluation or for more documentation, use an ICS Form 230 or equivalent.					CALFIRE 297 (Rev 3-2011)	
Pink - Finance		Blue - Home Unit IHE Coordinator		Yellow - Vendor		White - Govt Representative

Turn shift tickets into Finance.



STRUCTURE DEFENSE GUIDE

STRUCTURE TRIAGE DECISION PROCESS (S-FACTS)

SURVIVAL

- Initial Assessment: can you survive here? **If not, LEAVE NOW!**
- Is there a Safety Zone nearby? **If not, LEAVE NOW!** (IRPG)
- Do you have a viable Escape Route?
- What is the decision point at which you will leave based on fire behavior and rate of spread?
- Is there a Temporary Refuge Area (TRA) on site? **If not, LEAVE NOW!**
 - Preplanned area for immediate, temporary refuge
 - Use of fire shelter should not be necessary
 - Is there a viable Escape Route to the TRA or Safety Zone?
- Is "Prep and Go" tactic an option?
- Do you have communications with your supervisor and adjoining forces?
- If safety issues cannot be mitigated, **LEAVE NOW!**

FIRE ENVIRONMENT

- Can you survive based on current and expected fire behavior? **If not, LEAVE NOW!**
- Look up, Look Down, Look Around Indicators:
 - Fuels (characteristics, moisture, temperature)
 - What will the intensity of the fire be when it arrives?
 - How long will it take to consume the fuels?
 - Wind
 - Current speed/direction
 - Expect changing winds
 - Terrain
 - Are you in a chute, chimney, or saddle? **If yes, LEAVE NOW!**
 - Is wind in alignment with topography?
 - What is your position relative to topography?
 - Are you mid slope or on top of a ridge?
 - Atmospheric Stability
 - Fire Behavior (requires constant monitoring)
 - Spotting, crowning, sheeting, rate of spread?
 - Flame length and height?
- Other weather considerations:
 - What is the current relative humidity?
 - Is there an expected change?
 - Are thunderstorms forecasted?

ACCESS

- Is access compatible with time and distance factors necessary to utilize as an Escape Route to a Safety Zone?
 - Road surface adequate for speed necessary?
 - Adequate width?
 - Turnaround/turnouts?
 - Bridges within limits for fire apparatus?
 - Drainage ditches/culverts?
 - Steep grades?
 - Is there a safe place to spot apparatus?

CONSTRUCTION/CLEARANCE

- Does the structure have adequate defensible space, based on topography, fuels, and current and expected fire behavior?
- Can defensible space problems be mitigated quickly?
- Will building materials and yard clutter compromise safety?
- Is the construction wood siding or shake shingle roof?
- Are there vent openings, open eaves, large glass windows facing fire front, decks with vegetation below?
 - Will ember intrusion through attic or foundation vents be a problem?
- What are the contents in the garage and outbuildings?
- Are there hazardous materials present?
- Are there propane tanks, fuel tanks, or power lines?
- Is there an adequate water supply nearby?
- Are additional resources needed to mitigate issues?
- Consider "Prep and Go" or "Prep and Defend" tactics

TIME CONSTRAINTS

- Is there time for an adequate size up of the structure defense problem?
- Is there time to mitigate safety concerns?
- Is there time and adequate resources to properly prepare and defend the structure?
- Is there time to escape, utilizing Escape Routes, to a Safety Zone? **If not, LEAVE NOW!**

STAY OR GO

- Tactical decision based on the S-FACTS
- Is it safe to stay? If no, utilize "Check and Go" tactic
- Is there time to prepare the structure for defense and what will the fire behavior be when the fire gets here?
- "Prep and Go" or "Fire Front Following" tactics should be used when it is not safe to "Prep and Defend"

STRUCTURE TRIAGE CATEGORIES

Not-Threatened

- Safety Zone nearby and TRA present at structure
- Construction features/defensible space make the structure unlikely to ignite
- Residents may/may not have evacuated

Threatened Defensible

- Safety Zone nearby and TRA present at structure
- Construction features/defensible space require structure defense tactics during fire front impact
- Residents may/may not have evacuated

Threatened non-Defensible

- Lack of adequate Safety Zone nearby
- Structure cannot be safely defended
- Residents must be evacuated

ENTRAPMENT AVOIDANCE

- Are you adhering to the 10 Standard Firefighting Orders? (IRPG)
- Have you considered the 18 Situations that Shout Watch Out?
- Have you considered the Common Denominators of Fire Behavior on Tragedy Fires? (IRPG)
- Are you maintaining LCES? (IRPG)
- Look Up, Look Down, Look Around (IRPG)
- Have Decision Points ("Trigger Points") been established?
- Conduct Risk Management (IRPG)
 - Situational Awareness – Hazard Assessment – Hazard Control – Decision Point – Evaluate

STRUCTURE DEFENSE TACTICAL ACTIONS

- **Check & Go** – Most appropriate action when no Safety Zone/TRA is present and fire front impact is imminent. Conduct rapid evaluation to check for occupants and evaluate for follow up action. **LEAVE promptly.**
- **Prep & Go** – Structure preparation can be safely completed prior to fire front impact. Potential fire activity is too dangerous to remain and/or there is no Safety Zone/TRA present. **LEAVE before escape routes are compromised.**
- **Prep & Defend** – Appropriate when a Safety Zone is nearby and TRA is present. Adequate time exists to prepare the structure for defense prior to fire front impact. Escape routes must be maintained.
- **Fire Front Following** – Follow-up tactic after passage of the fire front. Involves searching for victims, perimeter control, hot spotting, and ember control.
- **Bump & Run** – Resources move ahead of the fire front extinguishing spot fires and defending structures. Utilize extreme caution.
- **Anchor & Hold** – Resources use large volume fire streams to extinguish structure fires, stop structure-to-structure ignitions, protect exposures, and control embers.
- **Tactical Patrol** – Resources remain mobile and continuously monitor assigned area after fire front passage. Involves aggressive mop up around structures.

Structure defense tactics are a vital part of perimeter control operations.

- *Stopping fire spread significantly eliminates the fire's threat to structures.*
- *Connect contained points along the fire's perimeter – typically near the structures at risk ("Connect the Dots").*
- *Perimeter control and structure defense should be done concurrently.*

LEVELS OF ENGAGEMENT

Consider **PACE**

- **P** Primary Plan (Offense)
 - Focused on firefighter safety and objectives
- **A** lternate Plan (Offense)
 - Fallback plan that closely resembles primary plan
- **C** ontingency Plan (Defense)
 - Focused on firefighter safety, move to a safety zone, temporary refuge areas
- **E** mergency Plan (Defense)
 - Firefighter survival
 - Deployment zones/Refuge areas
 - Fire shelters

Consider **DRAW-D**

- **D**efend – **R**einforce – **A**dvance – **W**ithdraw – **D**elay

IMMEDIATE NEED EVACUATION CHECKLIST

- Co-locate with law enforcement at ICP
- Identify evacuation area utilizing local maps. Include area of incident potential when determining evacuation area.
- Identify traffic control points for entry and exit of resources and civilians
- Identify areas that must be immediately evacuated and label "evacuation order" areas
- Identify areas that are potentially threatened and label "evacuation warning" areas
- Identify community safe refuge areas inside evacuation areas
- Determine and publish evacuation routes
- Identify and clearly communicate the decision points for implementing additional evacuation areas
- Identify areas of special needs population and large animals
- Consider use of public notification systems for evacuations

STRUCTURE DEFENSE FUNDAMENTALS

- Back equipment in for tactical mobility
- Shield apparatus from radiant heat – be aware of structure ignition potential
- Park in a cleared area (watch for power lines, trees)
- Have an engine/crew protection line identified
- Determine if residents are home. Determine best course of action – evacuate if safe to do so or shelter in place at safe location
- Maintain communications with all crew members
- Maintain at least 100 gallons of water reserve in your tank
- Top off your tank at every opportunity (use garden hose)
- For roof access, place owner's ladder at a corner of the structure on the side with the least fire threat and away from power drop
- Keep fire out of heavier fuels (suppress in lighter fuels)
- Clear area around above-ground fuel tank, shutting off tank
- Close windows and doors, including garage, leaving doors unlocked
- Place combustible outside furniture inside the structure
- Charge and place garden hoses strategically around structure for immediate use
- Move wood piles away from structures
- Consider applying foam/gel to the structure (roof and siding) and/or fuels
- **REMEMBER** to follow up with **TACTICAL PATROL!**

UNIT LOG (ICS 214)

1. Incident Name: WALL	2. Operational Period: Date From: 7/9/17 Date To: 7/10/17 Time From: 0700 Time To: 0700
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3. Unit Name/Designators	4. Unit Leader (Name and ICS Position)
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5. Personnel Assigned/Designators:

NAME	ICS POSITION	HOME BASE

6. Activity Log (Continue on Reverse)

TIME	MAJOR EVENTS

7. Prepared By:	Date/Time:
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