

INCIDENT ACTION PLAN CREWS INCIDENT

CA-SCU-004686

Thursday



OPERATIONAL PERIOD

7/9/2020 0700
to
7/10/2020 0700



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: <p style="text-align: center;">CREWS</p>	2. Operational Period:	Date From: 7/9/2020 Time From: 0700	Date To: 7/10/2020 Time To: 0700
---	-------------------------------	--	-------------------------------------

3. Objective(s):

Management Objectives

- Provide for emergency personnel and public safety at all times.
- Ensure COVID-19 precautions and best practices are met 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.

Control Objectives

- Keep the fire East of Crews Road
- Keep the fire South of Henry Coe State Park
- Keep the fire West of Highway 152
- Keep the fire North of Highway 152

General Situational Awareness:

Steep and rugged terrain, critically dry and receptive fuel beds, active area for fire history and drought stressed trees.

In the COVID-19 environment, high density populations or large groups are particularly at risk. To help protect yourself, your family and to ensure all employees return home safely, make sure to practice social distancing.

Enhanced hygiene (especially handwashing), PPE & monitoring practices help limit the infection rate of first responders.

5. Site Safety Plan Required? Yes No


Approved Site Safety Plan(s) Located at:

6. Incident Action Plan

<input checked="" type="checkbox"/> ICS 203	<input checked="" type="checkbox"/> ICS 215A	<input type="checkbox"/> ICS 205 A	<input type="checkbox"/>
<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"/> Facility Maps	<input checked="" type="checkbox"/> Travel Map	<input type="checkbox"/>
<input checked="" type="checkbox"/> ICS 206	<input checked="" type="checkbox"/> Weather Forecast	<input checked="" type="checkbox"/> Demob Plan	<input checked="" type="checkbox"/> County Health Message
<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: A. Mitchell	Position/Title: PSC	Signature:	
8. Approved by Incident Commander:	D. Martin / J. Janssen	Signature:	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: Date From: 7/9/2020		Date To: 7/10/2020	
CREWS		Time From: 0700		Time To: 0700	
3. Incident Commander(s) and Command Staff:			7. Operation Section:		
IC/UC's	J. Veik / R. Myers		Operations	T. Ernst / R. Janssen	
Deputy	D. Martin (T) / J. Janssen (T)		Deputy Operations	S. Corn	
Safety Officer	J. Segura / J. Novak (T)		Night Ops	S. Lauderdale	
Information Officer	R. Brocchini / R. Lubben (T)		Staging Area	J. Smith	
Liaison Officer	D. Pender / J. Kiszka (T) / R. Roberts (T)		Branch	III	S. Lane / L. Kalfsbeek (T)
4. Agency/Organization Representatives:			Division/Group	A / Y / D	K. Ryan (12 hr) / M. Klusyk (T) (12hr)
Agency/Organization	Name		Division/Group	M	S. Rohrs / J. Burgess (T)
Santa Clara County OEM	D. Reed		Division/Group	P	L. Ermigarat / G. Dean (T)
Gilroy FD	M. Bisbee		Division/Group	S	M. Jonsson
Cal OES	D. Franklin		Division/Group	Suppression Repair	
Santa Clara County Pub. Health	Dr. M. Fenstersheib		Branch		
CHP	C. Armstrong		Division/Group		
CDCR	C. Schwartz		Division/Group		
Line Officer	M. Marcucci		Division/Group		
SC Co. Sheriff	T. Lera		Division/Group		
CA State Parks	B. Lutton		Division/Group		
USFS	W. Harris		Branch		
PG&E	J. Walsh		Division/Group		
CALTRANS	S. Rem		Division/Group		
			Division/Group		
			Division/Group		
			Division/Group		
			Branch		
			Division/Group		
5. Planning Section:			Division/Group		
Chief	G. Garcia		Division/Group		
Deputy	A. Mitchell / S. Sherwood (T)		Division/Group		
Resource Unit	D. Scheurich / J. Anderson / M. Selzer / J. Heald (T) / J. Worden (T) / A. Summers (T) / M. Thomas (T)		Division/Group		
Situation Unit	C. Ingram / M. Thau (T)		Branch		
Documentation Unit			Division/Group		
Demobilization Unit	T. Shevenell		Division/Group		
GISS	T. Knecht		Division/Group		
FBAN	S. Volmer		Division/Group		
IMET	R. Walbrun		Division/Group		
Training Tech Spec	S. Vargas / I. Crossley (T)		Air Operations Branch:		Director: B. Kremensky
			Air Support Group Supervisor		N. Matteoli
			Air Tactical Group Supervisor		
6. Logistics Section:			Helibase Manager		K. Hill
Chief	S. Dohman				
Deputy Chief	J. Warden		8. Finance/Administration Section:		
Supply Unit	P. Lee		Chief	G. Belk	
Facilities Unit	B. Luiz / J. Peckham		Deputy Chief	R. Browne	
Ground Support Unit	J. Luckenbach		Time Unit	J. Navarro	
Communications Unit	J. Brooks / M. Heyforn (T)		Procurement Unit	J. Andrade	
Medical Unit	S. McGary		Comp/Claims Unit	B. Stirton	
			Cost Unit	J. Tapia	
Prepared By: Name:	A. Mitchell	Position/Title:	PSC	Signature:	
ICS 203		Date/Time:	7/8/2020 2300 hours		



Crews Fire Weather Forecast



FORECAST NO: 2

NAME OF FIRE: Crews CA-SCU-004686

PREDICTION FOR: Thurs-Fri am

UNIT: CalFire-Santa Clara

SHIFT DATE: 0700 7/9-0700 7/10

SIGNED: Ryan Walbrun-IMET WFO Monterey

TIME AND DATE

FORECAST ISSUED: 2000 7/8/2020

Incident Meteorologist

...Warming and Drying trend starts today and lasts into the weekend...

WEATHER DISCUSSION: A warming and drying trend starts today and lasts into the weekend. Any morning clouds will quickly mix out by 9 am. Then expect sunny skies with hotter and drier conditions as temps warm into the lower 90s with humidity dropping into the upper teens. Winds will be light through midday followed by a southwest seabreeze across most of Branch III. As the high pressure ridge builds the inversion layer will become shallow. This means that temperatures will remain warm overnight with little or no humidity recovery above 1000 feet.

WEATHER FORECAST THURSDAY:

WEATHER: A few morning clouds Branch I until 9 am otherwise sunny through the day.

TEMPERATURES: Upper 80s to lower 90s during the afternoon. Trend of 5 degrees warmer.

HUMIDITY: Lowering 17-22%, driest above 1000 feet in Branch III. Trend of 5% drier.

20 FT WINDS:

RIDGETOP - Southwest 5 mph increasing 5-10 mph with afternoon gusts 15 mph.

SLOPE/VALLEY - Light through midday then West to Southwest 4-8 mph gusts 12 mph.

STABILITY/INVERSION: Marine inversion around 1000 feet in the morning, mixing out by late morning.

WEATHER FORECAST FOR THURSDAY NIGHT:

WEATHER: Clear skies. Weak inversion layer around 1000 feet. Mild and dry above inversion overnight.

TEMPERATURES: Overnight lows 50-55 except 58-64 above 1000 feet.

HUMIDITY: Good recovery 60-80% lower slopes except 30-45% above 1000 feet.

20 FT WINDS:

RIDGETOP - Southwest 6-12 mph evening gusts 18 mph. Winds may trend North overnight.

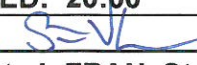
SLOPE/VALLEY - Southwest 5-10 mph gusts 15 mph thru sunset then light overnight.

STABILITY/INVERSION: Marine inversion layer 1000 feet.

EXTENDED FORECAST: High pressure will build Friday through Sunday with a warming and drying trend. Highs in the mid 90s with humidity to around 15%. Light winds except afternoon westerly seabreeze following Hwy 152 corridor.

SAFETY MESSAGE: Be mindful of rapidly lowering humidity during the overnight hours above 1000 feet. Hydration will become key over the coming days as hot days begin to add up!

FIRE BEHAVIOR FORECAST

FORECAST NUMBER: 3	TYPE OF FIRE: WILDLAND
FIRE NAME: CREWS CASCU-004686	OPERATIONAL PERIOD: JULY 9 0700-0700
DATE ISSUED: July 7, 2020	TIME ISSUED: 20:00
UNIT: Santa Clara	SIGNED:  Typed/printed: FBAN Stephen Volmer

INPUTS

WEATHER SUMMARY: Early morning light down canyon downslope winds transitioning to more breezy conditions in the afternoon and lasting through sundown. Temperatures will begin increasing over the next few days, with good overnight relative humidity recovery below 1000'elv. Expect temperatures to increase, and relative humidity to decrease beginning Friday.

Daytime high temperature low 90's, decreasing to the mid 50's in the evening. Minimum relative humidity will lower into the high teens with driest conditions above 1500'elv. Night time recovery will be good below 1000'elv with up to 80% humidity expected, above 1000'elv humidity will be 30-45%. Winds will be Southwest 5-10 with gusts to 15 possible throughout the entire shift

*****Warming and drying trend starting Friday, lasting through the weekend*****

OUTPUTS

FIRE BEHAVIOR

GENERAL: Fuels have continued to dry out but are still below critical levels. Expect ignitions to occur easily with dangerous fire spread rates when in alignment with wind, slope, and topography throughout the area. An inversion will set in over night and keep light fuels above 1000' dry and very receptive to any ignition source. The potential for increased fire activity will increase in the late morning when the inversion lifts.

SPECIFIC:

GRASS: Rate of Spread....110 ft/min Flame Length....7 ft Spotting....1/4 mi Probability of Ignition 75%

SHRUB: Rate of Spread....22 ft/min Flame Length....8 ft Spotting....1/3 mi Probability of Ignition 75%

OAK UNDERSTORY: Rate of Spread....3 ft/min Flame Length....1.5 ft Spotting....1/4 mi Probability of Ignition 75%

The above fire behavior values are valid for any new ignition in the following areas:

North along Hwy 101 to San Jose, South to the east side of Hollister, East along Hwy 152 to San Luis Reservoir

Sunset 7/9...20:27 Sunrise 7/10...05:55

AIR OPERATIONS: Limited visibility in the lower elevations of the fire early in the morning due to inversion setting in. Inversion will break apart by late morning allowing for increased visibility. Expect gusty Southwest winds over the ridgetops 15-20mph.


SAFETY

Watch your offroad parking locations, the dry grass will ignite easily from vehicles and exhaust heat.

Be alert for stump holes, they will still contain extremely hot material.

Health and Safety Message

We Are **ALL** accountable for **SAFE** behaviors
and **PREVENTING** the possible spread of **COVID 19**

INCIDENT: CREWS	DATE: July 9, 2020 TIME: 0700 - 0700
Major Hazards and Risks: Maintain proper social distancing of 6 ft or greater and SELF-MONITOR for any possible COVID symptoms and report immediately.	
<ul style="list-style-type: none">• Drink plenty of fluids. Limit caffeine intake. Hydrate early and often.• Keep your speeds down on all roadways, Drive defensively. Headlights and Seatbelts on!• Ensure radios are properly programmed for today's IAP and that crews are trained to operate radios.• Avoid Complacency, on relatively small fires or deceptively quiet areas of large fires.• Always have proper PPE on you at all times. Utilize PPE if there is any chance of encountering an ill person.• Lookout for SNAGS or weakened trees when working in and around burned areas.	
<u>Planning For Medical Emergencies</u>	<u>TAILGATE SAFETY</u>
<p>Supervisors and all firefighters need to ask and be able to answer the following three questions:</p> <p>1) What are we going to do if someone gets sick or hurt?</p> <ul style="list-style-type: none">• Is there PPE, personnel and equipment available to assist? <p>2) Where and how will they be transported?</p> <ul style="list-style-type: none">• By air or ground?• Nearest hospital/trama center/burn unit? <p>3) Has ALL proper notifications been made?</p> <ul style="list-style-type: none">• Contact Supervisor/Division• Contact Safety and Medical Unit leader	<ul style="list-style-type: none">• Accountability: Everyone checks in and everyone checks out. Supervisors know where their crews are at all times• Work Cycle: Maintain proper work rest ratio• Hydration and Nutrition: Monitor each other for proper hydration and nutrition• Safety gear: Everyone has the appropriate PPE and is using it• Briefing: Leaders intent is fully communicated, and safety briefing is provided
Prepared By: SOF1 J. Segura / J. Novak (T)	Signature: 
	Date: 7/8/2020 Time: 2020

INCIDENT ACTION PLAN SAFETY ANALYSIS (ICS 215A)

1. Incident Name: CREWS	2. Operational Period:	Date From: 7/9/20 Time From: 0700	Date To: 7/10/20 Time To: 0700
Incident Area	Hazard/Risks	Mitigations	
ALL	Prevent COVID-19 Transmission	Practice social distance of 6 ft. or greater. Take part in daily self-assessment, report negative findings. Maintain constant hygiene, wash hands frequently Don't share pens or pass around paper to the group Disinfect PPE, workspace and equipment,	
ALL	Pre-Existing Medical Conditions	Report to section leader Limit risk of exposure. Wear all appropriate PPE.	
ALL	Weather	Maintain situational awareness for changing winds and gusts. Be familiar with weather predictions and monitor conditions.	
ALL	Driving Hazards	Drive defensively! Expect the unexpected. Drive with headlights and seatbelts on. Increase following distance. Utilize wheel chocks and always look before backing.	
ALL	Poison Oak	Wear PPE, avoid when possible, wash and decon after exposure, Make notifications with MEDL and SOF,	
ALL	Hydration/Nurishment/Wellbeing	Drink water frequently. Before, during and after your shift. Wash or sanitize hand before eating. Take breaks as needed. Take care of yourself and crew members.	
ALL	PPE (Infectious Disease)	Wear when appropriate. Have access to a mask, goggles, and medical gloves in case of an emergency.	
ALL	Communications	Know where you are in case you need to use 911. Understand and ask COVID-19 medical questions. Ensure instructions are clear and understood. Brief others as needed. Communicate hazards to others.	
5. Prepared By: J.Segura / J.Novak (T) Position/Title: SOF1			
ICS 215A	Date/Time: 7/8/2020 / 2020	<i>George H. Segura</i>	

County of Santa Clara

Public Health Department



COVID-19 SPECIFIC:

What are the symptoms of the novel coronavirus?

- Symptoms include fever, fatigue, cough, loss of taste or smell, and aches
- The illness can progress to shortness of breath and complications from pneumonia
- Symptoms may also include nausea with vomiting and diarrhea. Some infected patients experience only mild symptoms while others – particularly older individuals and those with underlying health conditions – might develop more severe symptoms
- If you have any of these symptoms, please talk to YOUR LOCATION's Safety Officer

How can I best protect myself from getting the novel coronavirus?

- Use proper hygiene including washing hands with soap and or using hand sanitizers
- Avoid touching your face, particularly your eyes, nose, and mouth because one-way viruses spread is when you touch your mouth, nose, or eyes
- Cough or sneeze into a tissue, sleeve, or arm--Do not use your hands
- Clean frequently touched surfaces such as countertops and doorknobs
- Keep away from others who are sick
- Stay home when you are sick

What should I do if I do not feel Well?

- If you have a fever, go home immediately and stay there until at least three days **after** the fever goes away naturally without the use of fever-reducing medicine, assuming that you have not tested positive for COVID-19. (For example: if your fever lasts for three days, you should stay home for at least six days)
- If you have a fever and any of the symptoms listed above, you should self-isolate at home and consult with your doctor.
- Consider not attending or hosting large gatherings. This is where cold, flu, and other respiratory viruses are often spread.

ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED
INFORMATION//BASIC

1. Incident Name:	2. Operational Period:	3. Branch	Division
CREWS	Date From: 07/09/20 Date To: 07/10/20 Time From: 0700 Time To: 0700	III	A / Y / D

4. Operations Personnel: **Page 1 of 1** Alpha / Yankee / Delta

Operations Section Chief: T. Ernst / R. Janssen	Night Ops: S. Lauderdale
Branch Director: S. Lane / L. Kalfsbeek (T)	Branch Safety:
Division/Group Supervisor: K. Ryan (12 hr) / M. Klusyk (T) (12hr)	Air Attack:

5. Resources Assigned:		** Resources Below in Bold are 12 Hour **					
Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location
STC NEU 9230C			R. Counts	16	E-17	0700-1900	CANADA X HWY 152
WT PVT E-27			D. Keylon	2	E-27	0700-1900	CANADA X HWY 152
WT PVT E-79			J. Newman	2	E-79	0700-1900	CANADA X HWY 152

6. Work Assignments:
 Walk and validate control lines.
 Improve direct fire line. Mop up 300' in from control line.
 Backhaul all trash.

7. Special Instructions:

8. Communications							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
NIFC C1	2	COMMAND	170.9750N	T1 - 110.9	168.7000N	T1 - 110.9	LOMA MUJERAS HP-DIV AY/D
CDF T26	5	TACTICAL	159.2925N	T16 - 192.8	159.2925N	T16 - 192.8	
CDF T15	14	AIR TO GROUND	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
GUARD7	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY

9. Prepared by: Name:	M. Selzer	RESL	Signature:
ICS 204	Date/Time: 7/8/2020	2200	Personnel Count: 20

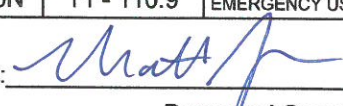
ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED
INFORMATION//BASIC

1. Incident Name: CREWS		2. Operational Period: Date From: 07/09/20 Date To: 07/10/20 Time From: 0700 Time To: 0700				3. Branch Division III M	
4. Operations Personnel:						Page 1 of 1	Mike
Operations Section Chief: T. Ernst / R. Janssen				Night Ops: S. Lauderdale			
Branch Director: S. Lane / L. Kalfsbeek (T)				Branch Safety: _____			
Division/Group Supervisor: S. Rohrs / J. Burgess (T)				Air Attack: _____			
5. Resources Assigned:		** Resources Below in Bold are 12 Hour **					
Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location
STC LNU 9141C			C. Aragon	16	E-68	0700-0700	JAMIESON X CANADA
STG AEU 9275G			H. Drummond	33	C-8	0700-0700	JAMIESON X CANADA
WT PVT E-26			K. Merwin	2	E-26	0700-0700	JAMIESON X CANADA
WT PVT E-77			D. Sasser	2	E-77	0700-0700	JAMIESON X CANADA
6. Work Assignments: Construct and hold line utilizing direct tactics. Improve direct fire line. Mop up 300' in from control line. Walk and validate control lines.							
7. Special Instructions: 							
8. Communications							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
NIFC C9	3	COMMAND	170.0125N	T1 - 110.9	165.2500N	T1 - 110.9	PACHECO PEAK-DIV M/DIV P/DIV S
CDF T28	6	TACTICAL	151.1825N	T16 - 192.8	151.1825N	T16 - 192.8	
CDF T15	14	AIR TO GROUND	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
GUARD7	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY
9. Prepared by: Name: M. Selzer RESL Signature:							
ICS 204	Date/Time: 7/8/2020 2200			Personnel Count: 53			

ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED
INFORMATION/BASIC

1. Incident Name: CREWS			2. Operational Period: Date From: 07/09/20 Date To: 07/10/20 Time From: 0700 Time To: 0700				3. Branch III		Division P	
4. Operations Personnel: Operations Section Chief: T. Ernst / R. Janssen Branch Director: S. Lane / L. Kalfsbeek (T) Division/Group Supervisor: L. Ermigarat / G. Dean (T)						Night Ops: S. Lauderdale Branch Safety: Air Attack:				
5. Resources Assigned:			** Resources Below in Bold are 12 Hour **							
Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location			
STC LNU 9140C			R. Wettstein	16	E-148	0700-0700	PACHECO STATION			
STG TCU 9447G			E. Blakeway	32	C-6	0700-0700	PACHECO STATION			
CRW XCC-CON CREW 12			A. Brunton	14	C-25	0700-1900	PACHECO STATION			
WT PVT E-80			R. Anderson	2	E-80	0700-0700	PACHECO STATION			
WT PVT E-87			L. Estrada	2	E-87	0700-1900	PACHECO STATION			
FEMT SCHMITZ			D. Schmitz	1	O-114	0700-0700	PACHECO STATION			
FEMP VALLELUNGA			R. Vallelunga	1	O-115	0700-0700	PACHECO STATION			
6. Work Assignments: Construct and hold line utilizing direct tactics. Improve direct fire line. Mop up 300' in from control line. Walk and validate control lines.										
7. Special Instructions:										
8. Communications										
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes			
NIFC C9	3	COMMAND	170.0125N	T1 - 110.9	165.2500N	T1 - 110.9	PACHECO PEAK-DIV M/DIV P/DIV S			
VFIRE 25	7	TACTICAL	154.2875N	T6 - 156.7	154.2875N	T6 - 156.7				
CDF T15	14	AIR TO GROUND	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND			
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION			
GUARD7	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY			
9. Prepared by: Name: M. Selzer			RESL		Signature: 					
ICS 204			Date/Time: 7/8/2020 2200		Personnel Count: 68					

ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED
INFORMATION/BASIC

1. Incident Name: <b style="text-align: center;">CREWS		2. Operational Period: Date From: 07/09/20 Date To: 07/10/20 Time From: 0700 Time To: 0700			3. Branch Division <b style="text-align: center;">III <b style="text-align: center;">S		
4. Operations Personnel: Operations Section Chief: T. Ernst / R. Janssen Branch Director: S. Lane / L. Kalfsbeek (T) Division/Group Supervisor: M. Jonsson			Night Ops: S. Lauderdale Branch Safety: Air Attack:			Page 1 of 1 Sierra	
5. Resources Assigned:		** Resources Below in Bold are 12 Hour **					
Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location
STC MRN 9150C			J. Pierce	18	E-205	0700-0700	JAMIESON X CANADA
STG LNU 9143G			J. Galvin	26	C-5	0700-0700	JAMIESON X CANADA
CRW BEU GABILAN 3			W. Gray	12	C-3	0700-1900	JAMIESON X CANADA
WT PVT E-78			C. Avila	2	E-78	0700-0700	JAMIESON X CANADA
WT PVT E-83			T. Kelly	2	E-83	0700-0700	JAMIESON X CANADA
FEMP POPE			R. Pope	1	O-238	0700-0700	JAMIESON X CANADA
FEMP WARREN			N. Warren	1	O-239	0700-0700	JAMIESON X CANADA
6. Work Assignments: Construct and hold line utilizing direct tactics. Improve direct fire line. Mop up 300' in from control line. Walk and validate control lines.							
7. Special Instructions:							
8. Communications							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
NIFC C9	3	COMMAND	170.0125N	T1 - 110.9	165.2500N	T1 - 110.9	PACHECO PEAK-DIV M/DIV P/DIV S
VFIRE 26	8	TACTICAL	154.3025N	T6 - 156.7	154.3025N	T6 - 156.7	
CDF T15	14	AIR TO GROUND	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
GUARD7	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY
9. Prepared by: Name: M. Selzer RESL Signature: <i>Mato J</i>							
ICS 204		Date/Time: 7/8/2020 2200		Personnel Count: 62			

ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED
INFORMATION//BASIC

1. Incident Name: <p style="text-align: center; font-weight: bold; font-size: 1.2em;">CREWS</p>	2. Operational Period: Date From: 07/09/20 Date To: 07/10/20 Time From: 0700 Time To: 0700	3. Branch Division <p style="text-align: center; font-weight: bold; font-size: 1.2em;">Suppression Repair</p>
---	---	--

4. Operations Personnel:	Page 1 of 1
---------------------------------	--------------------

Operations Section Chief: T. Ernst / R. Janssen	Night Ops: S. Lauderdale
Branch Director:	Branch Safety:
Division/Group Supervisor:	Air Attack:

5. Resources Assigned:		** Resources Below in Bold are 12 Hour **					
Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location
DOZ PVT E-35			T. Scramtim	2	E-35	0700-1900	CHRISTMAS HILL PARK
DOZ PVT E-39			T. Bishop	2	E-39	0700-1900	CHRISTMAS HILL PARK
DOZ PVT E-40			E. Roen	2	E-40	0700-1900	CHRISTMAS HILL PARK
DOZ PVT E-41			C. Avila	2	E-41	0700-1900	CHRISTMAS HILL PARK
CHIP PVT E-184			J. Hagins	2	E-184	0700-1900	CHRISTMAS HILL PARK
WT PVT E-24			J. Owens	2	E-24	0700-1900	CHRISTMAS HILL PARK
WT PVT E-85			P. Curry	2	E-85	0700-1900	CHRISTMAS HILL PARK
FOBS FAZIO			J. Fazio	1	O-26	0700-1900	CHRISTMAS HILL PARK
FOBS ORME			M. Orme	1	O-79	0700-1900	CHRISTMAS HILL PARK
FOBS (T) MACKEWICZ			N. Mackewicz	1	O-10	0700-1900	CHRISTMAS HILL PARK

6. Work Assignments:
 Identify suppression repair needs.
 Knock down Dozer berms.
 Water bar dozer line per FSR needs.

7. Special Instructions:
 If working in DIV M, P, S, utilize NIFC C9 for command.

8. Communications							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
NIFC C1	2	COMMAND	170.9750N	T1 - 110.9	168.7000N	T1 - 110.9	LOMA MUJERAS HP-DIV AY/D
CDF T35	9	TACTICAL	159.3225N	T16 - 192.8	159.3225N	T16 - 192.8	
CDF T15	14	AIR TO GROUND	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
GUARD7	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY

9. Prepared by: Name:	M.Selzer	RESL	Signature:
ICS 204	Date/Time: 7/8/2020	2200	Personnel Count: 17

ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED
INFORMATION//BASIC

1. Incident Name:	2. Operational Period:	3. Branch Division
CREWS	Date From: 07/09/20 Date To: 07/10/20 Time From: 0700 Time To: 0700	Staging

4. Operations Personnel: Page 1 of 1

Operations Section Chief: T. Ernst / R. Janssen	Night Ops: S. Lauderdale
Branch Director:	Branch Safety:
Division/Group Supervisor: J. Smith	Air Attack:

5. Resources Assigned: **** Resources Below in Bold are 12 Hour ****

Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location

6. Work Assignments:
 Maintain 3 minute response time.
 Monitor command frequencies.

7. Special Instructions:

8. Communications

Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
NIFC C1	2	COMMAND	170.9750N	T1 - 110.9	168.7000N	T1 - 110.9	LOMA MUJERAS HP-DIV A/Y/D
CDF T15	14	AIR TO GROUND	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
GUARD7	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY

9. Prepared by: Name: M. Selzer RESL Signature:
ICS 204 Date/Time: 7/8/2020 2200 Personnel Count: 0

AIR OPERATIONS SUMMARY ICS-220													
Incident Name / Number CREWS / CA-SCU-004686			Sunrise 5:55 Startup 6:25 Cutoff 19:58 Sunset 20:28			Time Prepared 1500 Shutdown 20:58		Date Prepared Wednesday, July 8, 2020 Operational Period - Date Thursday July 9, 2020		Prepared By Burke Kremensky Operational Period - Time 0700-2100			
General Remarks, Safety Notes, Hazards, Air Operations Special Equipment, etc. TRACK ALL DIPSITE LOCATIONS / NUMBER OF DIPS / GALLONS TAKEN. TRACK ALL DROP LOCATIONS / NUMBER OF DROPS / GALLONS DROPPED ALL GPS DATA TO BE COLLECTED IN DEGREES, MINUTES, DECIMAL MINUTES FORMAT. AVOID Aerial Application of Retardant / Foam / Agent within 300' of Waterways, Bodies of Water, etc. If Retardant / Foam / Agent is Dropped Within These Areas Immediately Notify the AOB and Provide the Following Information: Lat / Long, Estimated Number of Gallons and a Map Detailing The Area.													
Helibase Information			Helibase Information			TFR Information			Rescue Ship Information				
Name San Martin			Name San Martin			Request # A-72			Day Helist 840				
Latitude 37.04 53.07			Latitude 37.04 53.07			Polygon:			Name 840				
Longitude 121.350 48.5			Longitude 121.350 48.5			Altitude: 3,500 MSL			Phone (650)245-1715				
Name			Name			Centerpoint: 37 00.42 Lat			Make/Model UH-60G				
Latitude			Latitude			121 27.20 Long			Location San Martin				
Longitude			Longitude			NOTAMS: 8/6883			Request Procedure for These Aircraft: San Martin				
(use page 2, if needed)			(use page 2, if needed)			Frequency 125.8250			Incident Communications				
						http://tfr.faa.gov/tfr2/list.html			See Medical Plan For Additional Info				
Frequencies			Position			Name			Trainee				
Command			AOBD			B. Kremensky							
AIR / GROUND - TACTICAL			ASGS			N. Mateoli							
AIR/AIR ROTARY WING			HEBM			K. Hill							
Helico Briefing													
AIR TACTICS			HLCO			Lejuan/Renner							
Air Attack Briefing			AAML										
TOLC			HLCO										
DECK			ATGS										
CALCORD - MEDICAL													
AIRGUARD - Emergency Only													
HELICOPTERS (Use page 2 if Needed)													
FAA #	Type	Make/Model	Helibase	Avail	Start	Remarks	FAA #	Type	Make/Model	Helibase	Avail	Start	Remarks
242BH	III	206L3	San Martin	0800	0830	Helico/Recon							
4TV	III	AS350B	San Martin	0800	0830	Helico/Recon							
316LH	II	B212S	San Martin	0800	0830	Bucket, LL, Standard							
811KA	II	BH212HP	San Martin	0800	0830	Bucket, LL, Standard							
82BH	I	UH60A	San Martin	0800	0830	Bucket, LL							
FIXED WING (Use Page 2 if Needed)													
FAA #	Type	Make/Model	Base	Avail	Start	Remarks	FAA #	Type	Make/Model	Base	Avail	Start	Remarks

ICS 205 - INCIDENT RADIO COMMUNICATIONS PLAN

1. Incident Name: CREWS Incident Channels		2. Date/Time Prepared Date: 07/08/2020 Time: 1930		3. Operational Period: Date To: 07/10/20 Time To: 0700	
--	--	--	--	---	--

4. Communications								
Ch#	Function	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
1								
2	COMMAND	NIFC C1	ALL DIVISIONS	170.9750N	T1 - 110.9	168.7000N	T1 - 110.9	LOMA MUJERAS HP-DIV A/Y/D
3	COMMAND	NIFC C9	ALL DIVISIONS	170.0125N	T1 - 110.9	165.2500N	T1 - 110.9	PACHECO PEAK-DIV M/DIV P/DIV S
4								
5	TACTICAL	CDF T26	DIV A/DY	159.2925N	T16 - 192.8	159.2925N	T16 - 192.8	
6	TACTICAL	CDF T28	DIV M	151.1825N	T16 - 192.8	151.1825N	T16 - 192.8	
7	TACTICAL	VFIRE 25	DIV P	154.2875N	T6 - 156.7	154.2875N	T6 - 156.7	
8	TACTICAL	VFIRE 26	DIV S	154.3025N	T6 - 156.7	154.3025N	T6 - 156.7	
9	TACTICAL	CDF T35	SUPP REPAIR	159.3225N	T16 - 192.8	159.3225N	T16 - 192.8	
10								
11								
12								
13	TACTICAL	VTAC14	RADIO BRIEFING	159.4725N	T6 - 156.7	159.4725N	T6 - 156.7	
14	AIR TO GROUND	CDF T15	ALL DIVISIONS	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
15	MEDICAL	CALCORD	ALL DIVISIONS	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
16	AIRGUARD	GUARD7	ALL DIVISIONS	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY
17								
18								
19								
20	AIRGUARD	GUARD7	ALL DIVISIONS	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY

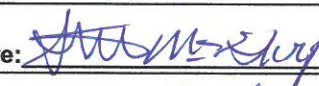
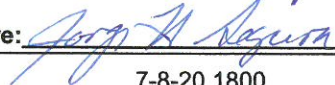
5. Special Instructions

TO CONFIRM YOU HAVE THE MOST CURRENT CLONE, ENSURE YOUR DISPLAY OF CHANNEL 16 OR 20 MATCHES CHANNEL 16 OR 20 OF THE 205 - HEIGHT AND POWER ARE KEY WHEN USING RADIOS; BE AT A HIGH POINT, USE A MOBILE IF POSSIBLE, AND USE RADIO RELAYS WHEN NEEDED

6. Prepared by (Communications Unit Leader): Name: JOHN BROOKS, IMT 6 COML		Signature: 
ICS 205 - CONTROLLED UNCLASSIFIED INFORMATION//BASIC		Date/Time: 07/08/20 1930

The Operational
Briefing will be
broadcast at **0700** on
VTAC14

MEDICAL PLAN (ICS 206)

1. Incident Name: <p style="text-align: center;">CREWS</p>		2. Operational Period: Date From: <u>7/9/20</u> Date To: <u>7/10/20</u> Time From: <u>0700</u> Time To: <u>0700</u>					
3. Medical Aid Stations:							
Name	Location	Contact Number/Freq	Paramedics				
CAL MAT	ICP	916-247-1940/Crews Comms	Yes				
4. Transportation (indicate air or ground):							
Ambulance Service	Location	Contact Number	Level of Service				
AMR Santa Clara Medic 50 (Ground)	Canada and HWY152	Crews Comms	ALS				
AMR Santa Clara Medic 58 (Ground)	Canada and HWY 152	Crews Comms	ALS				
CAL STAR (Air)	Gilroy	Crews Comms	ALS				
Guard 840 (Air)	St. Martin Helibase	Crews Comms	ALS				
5. Hospitals:							
Hospital Name	Address,	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	Helipad
	Lat & Long Helipad		Air	Ground			
Saint Louise Regional Med	9400 No Name Uno, Gilroy, CA Lat/Long: N37.02.13, W121. 34.27	(408)848-8680	5 MIN	10 MIN		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Regional Medical Center	225 North Jackson Ave., San Jose, CA 95116-1691, Lat/Long: N37.18.85, W121.56.05	(408) 259-5000	10 MIN	30 MIN	Level 2	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Santa Clara Valley Medical Center	751 S. Bascom Ave., San Jose, CA 95128, Lat/Long: N37.18.85, W121.56.05	(408) 885-5000	10 MIN	40 MIN	Level 1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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.			
<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): <p style="text-align: center;">S. McGary</p>				Signature: <u></u>			
8. Approved by (Safety Officer): <p style="text-align: center;">J. Segura / J. Novak (T)</p>				Signature: <u></u>			
ICS 206		NIMS IAP	Date/Time:		7-8-20 1800		

TRAINING MESSAGE

ALL Trainee's must have their training package to the Training Specialist's by noon on Friday
7/10/2020

Trainees DEMOBING :

Prior to demobing please bring the following to training:

- Task Book
- Evaluations
- ICS 225's

If you have all of your documents, it is not necessary to bring your trainer with you to the training specialist office.

Any questions please contact the Training Specialist:

Shane Vargas: (530) 410-4225

DEMOBILIZATION INSTRUCTIONS

Crews Incident CA-SCU-004686

DEMOB PROCEDURES

- CHECK THE DEMOB LIST EACH MORNING. YOU CAN FIND THE DEMOB LIST THROUGH THE "QR" CODE ON THE I.A.P. COVER OR ON LISTS POSTED THROUGHOUT CAMP. **ONLY REPORT TO DEMOB AT YOUR SCHEDULED TIME.** EARLY ADMITTANCE WILL NOT BE ALLOWED.
- **FLIGHT ARRANGEMENTS MUST BE MADE 48HRS PRIOR TO RELEASE.**
- REPORT TO DEMOB AT APPOINTMENT TIME TO RECEIVE A CHECKOUT FORM (ICS-221), THEN GO TO THE FOLLOWING UNITS TO OBTAIN THE NECESSARY SIGNATURES:
 - ✓ SUPPLY UNIT
 - ✓ COMMUNICATIONS UNIT
 - ✓ GROUND SUPPORT/VEHICLE INSPECTION***
 - ✓ DOCUMENTATION UNIT
 - ✓ TIME UNIT
 - ✓ TRAINING UNIT (IF APPLICABLE)
 - ✓ ACCOMMODATIONS (IF APPLICABLE)

***VEHICLE INSPECTION:

- THE DEMOB UNIT WILL INFORM YOU IF THE VEHICLE NEEDS TO BE INSPECTED.
- YOU MUST HAVE THE ICS-221 DEMOB FORM WITH YOU AT VEHICLE INSPECTION.
- A VEHICLE INSPECTION TIME WILL BE PROVIDED WHEN YOU INITIALLY ARRIVE TO THE DEMOBILIZATION UNIT.
- **DO NOT REPORT FOR VEHICLE INSPECTION PRIOR TO YOUR APPOINTMENT**

HAVE YOUR EQUIPMENT INVENTORY CARD READY WHEN HEADING TO VEHICLE INSPECTION.

RETURN THE COMPLETED ICS-221 FORM TO THE DEMOB UNIT AND TRAVEL HOME SAFE!



PUBLIC INFORMATION



Official Sources of Public Information

Incident Information Line: (530-645-9663)

Incident Media Line: (530-645-9798)

Incident Website: www.fire.ca.gov

Email Signup: <https://tinyurl.com/CALFIREMEDIA>

Media Law

The California State Penal Code Section 409.5(d) allows the news media to enter scenes of disaster, riot, or civil disturbance. Properly identified members of the news media should not be restricted from entering locations specified within the code. However, this does not include crime scenes, and does not imply that the news media may interfere with incident operations while they are in the areas of concern. If entering such a location that is hazardous, they should be advised; media access cannot be prevented for safety reasons unless their presence would impede CAL FIRE's mitigation of the incident or the disturbing of evidence. When working around the media, remember:

- Media is **not permitted** on private property without the property owners permission.
- If approached and questioned by the media and or the public, talk about your assignment or task at hand. Remember to wear all the appropriate PPE.
- If needed call for an incident PIO through the chain of command.
- Never speculate, give opinions or speak for others.
- There is no such thing as an "off the record" comment.

CAL FIRE Social Media Policy (Social Media 0691)

Social Media is increasingly being used by public agencies, the media as well as the public. This form of communication continues to grow rapidly in order to supply the instant gratification needs of society. Therefore when on a CAL FIRE incident you will adhere to the CAL FIRE Social Media Policy, 0691. You can get further information about the CAL FIRE Social Media Policy from the incident Public Information Officer. While assigned to the incident, there will be no posting of:

- Inappropriate information or materials
- No opinions
- No endorsements
- Inappropriate pictures or videos

Lost and Found

The Information Section will manage Lost and Found items for the incident. If you have lost an item leave your contact information and what you have lost at the Information Section. If you have found an item on the incident bring the item to the Information Section with your contact information as well.

Incident Base Camp Mailing Address

**c/o Public Information Office/Trailer
7050 Miller Ave
Gilroy, CA 95020
Christmas Hill Park**

SHIFT TICKET EXAMPLE

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name DOZER DUDE						
Incident or Project Name CREWS FIRE		Incident Number CASCU004686	Request Number E # 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 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						
Equipment Use (Circle) Hours Days / Miles					Released by Government Withdrawn by Contractor						
Date Mo / Day	Start	Stop	Work	Assignment	Remarks/Comments ** 1 OPERATOR NO DAMAGE/ NO CLAIMS						
7/8	0001	700	7	OFF SHIFT							
7/8	0700	1900	12	SUPPRESSION REPAIR							
7/8	1900	2400	5	OFF SHIFT							
Vendor Rating					Govt. Rep. Name and Position - PRINT Mike Weber						
<table border="1"> <tr> <td>Poor*</td> <td>Avg.</td> <td>Good</td> <td>Exc.</td> <td>N/A</td> </tr> </table>					Poor*	Avg.	Good	Exc.	N/A	Govt. Rep. Signature <i>Mike Weber</i>	
Poor*	Avg.	Good	Exc.	N/A							
Met Performance Expectations					Contractor Signature <i>Bob Smith</i>						
Equipment in Safe Working Condition					Date 07/08/20						
Operator Skill Level					Time 0800						
Operates Safely					Date 07/08/20						
Operator's Cooperation Level					Time 0800						
Overall Performance					CALFIRE 297 (Rev 3-2011)						
* NOTE: Any rating of POOR requires an explanation in Comment Section.											
**Final evaluation or for more documentation, use an ICS Form 230 or equivalent.											
Pink - Finance		Blue - Home Unit HE Coordinator		Yellow - Vendor		White - Govt Representative					

Vendor Rating must be done.

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name TRANSPORT COMPANY						
The responsible Government Officer will complete this form each shift					Operator #1 BOB SMITH						
Incident or Project Name CREWS FIRE		Incident Number CASCU 004686	Request Number E # Here		Operator #2						
Agreement Number XXX - 000000 - 00					Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government						
Equipment Make PETERBUILT		Equipment Model / Type 3S2 18 WHEEL			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						
Equipment Use (Circle) Hours Days / Miles					Released by Government Withdrawn by Contractor						
Date Mo / Day	Start	Stop	Work	Assignment	Remarks/Comments ** 1 OPERATOR NO DAMAGE/ NO CLAIMS						
7/8	0001	700	7	OFF SHIFT							
7/8	0700	1900	12	SUPPRESSION REPAIR							
7/8	1900	2400	5	OFF SHIFT							
Vendor Rating					Govt. Rep. Name and Position - PRINT Mike Weber						
<table border="1"> <tr> <td>Poor*</td> <td>Avg.</td> <td>Good</td> <td>Exc.</td> <td>N/A</td> </tr> </table>					Poor*	Avg.	Good	Exc.	N/A	Govt. Rep. Signature <i>Mike Weber</i>	
Poor*	Avg.	Good	Exc.	N/A							
Met Performance Expectations					Contractor Signature <i>Bob Smith</i>						
Equipment in Safe Working Condition					Date 07/08/20						
Operator Skill Level					Time 0800						
Operates Safely					Date 07/08/20						
Operator's Cooperation Level					Time 0800						
Overall Performance					CALFIRE 297 (Rev 3-2011)						
* NOTE: Any rating of POOR requires an explanation in Comment Section.											
**Final evaluation or for more documentation, use an ICS Form 230 or equivalent.											
Pink - Finance		Blue - Home Unit HE Coordinator		Yellow - Vendor		White - Govt Representative					

Vendor Rating must be done.

Turn shift tickets into Finance.

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)

Incident#:
Request #:

LOCATION / INCIDENT NAME:	INCIDENT NUMBER:	UNIT:	REGION:	DATE:
THE FOLLOWING ARTICLES WERE: (broken, left on line, damaged, or other)				DATE OF OCCURANCE:

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

DIV: _____ Div's Name: _____
Div. Signature: _____
 Attention Division Group Sup., by signing you are authorizing the above items to be replaced by the Supply Unit and / or Fire.

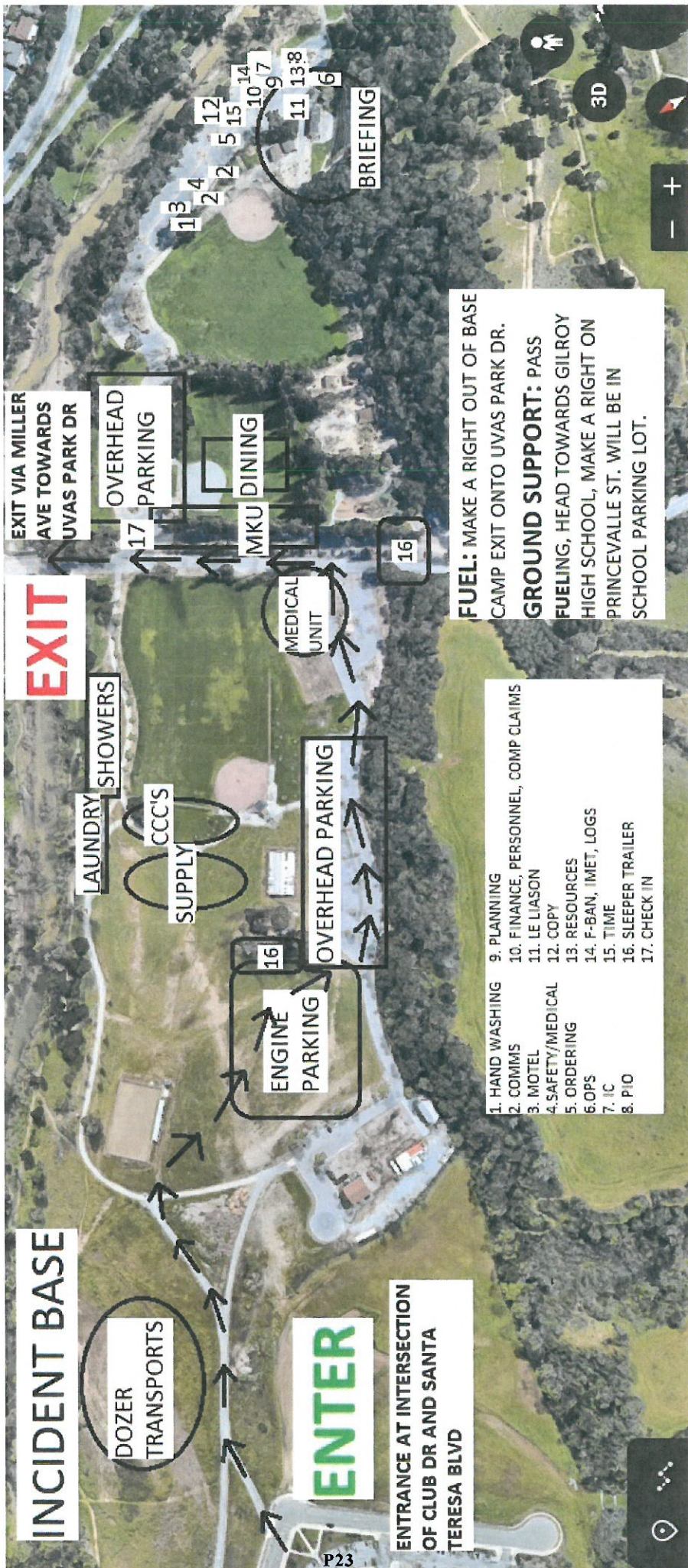
LOCATION OF ITEMS: _____
 REMARKS: _____

SIGNATURE OF PERSON CERTIFYING OCCURANCE AS DESCRIBED			
SIGNATURE:	PRINTED NAME:	TITLE:	DATE:

UNIT SUPERVISOR'S APPROVAL:

COMMENTS: _____

SIGNATURE OF UNIT ADMINISTRATOR:	TITLE:	DATE:
----------------------------------	--------	-------



INCIDENT BASE

DOZER
TRANSPORTS

ENTER

ENTRANCE AT INTERSECTION
OF CLUB DR AND SANTA
TERESA BLVD

EXIT

EXIT VIA MILLER
AVE TOWARDS
UVAS PARK DR

LAUNDRY SHOWERS

CCC'S

SUPPLY

ENGINE
PARKING

OVERHEAD PARKING

MEDICAL
UNIT

MKU
DINING

OVERHEAD
PARKING

BRIEFING

- 1. HAND WASHING
- 2. COMMS
- 3. MOTEL
- 4. SAFETY/MEDICAL
- 5. ORDERING
- 6. OPS
- 7. IC
- 8. PIO
- 9. PLANNING
- 10. FINANCE, PERSONNEL, COMP CLAIMS
- 11. LE LIASON
- 12. COPY
- 13. RESOURCES
- 14. F-BAN, IMET, LOGS
- 15. TIME
- 16. SLEEPER TRAILER
- 17. CHECK IN

FUEL: MAKE A RIGHT OUT OF BASE
CAMP EXIT ONTO UVAS PARK DR.
GROUND SUPPORT: PASS
FUELING, HEAD TOWARDS GILROY,
HIGH SCHOOL, MAKE A RIGHT ON
PRINCEVALLE ST. WILL BE IN
SCHOOL PARKING LOT.

GROUND SUPPORT / FUELING

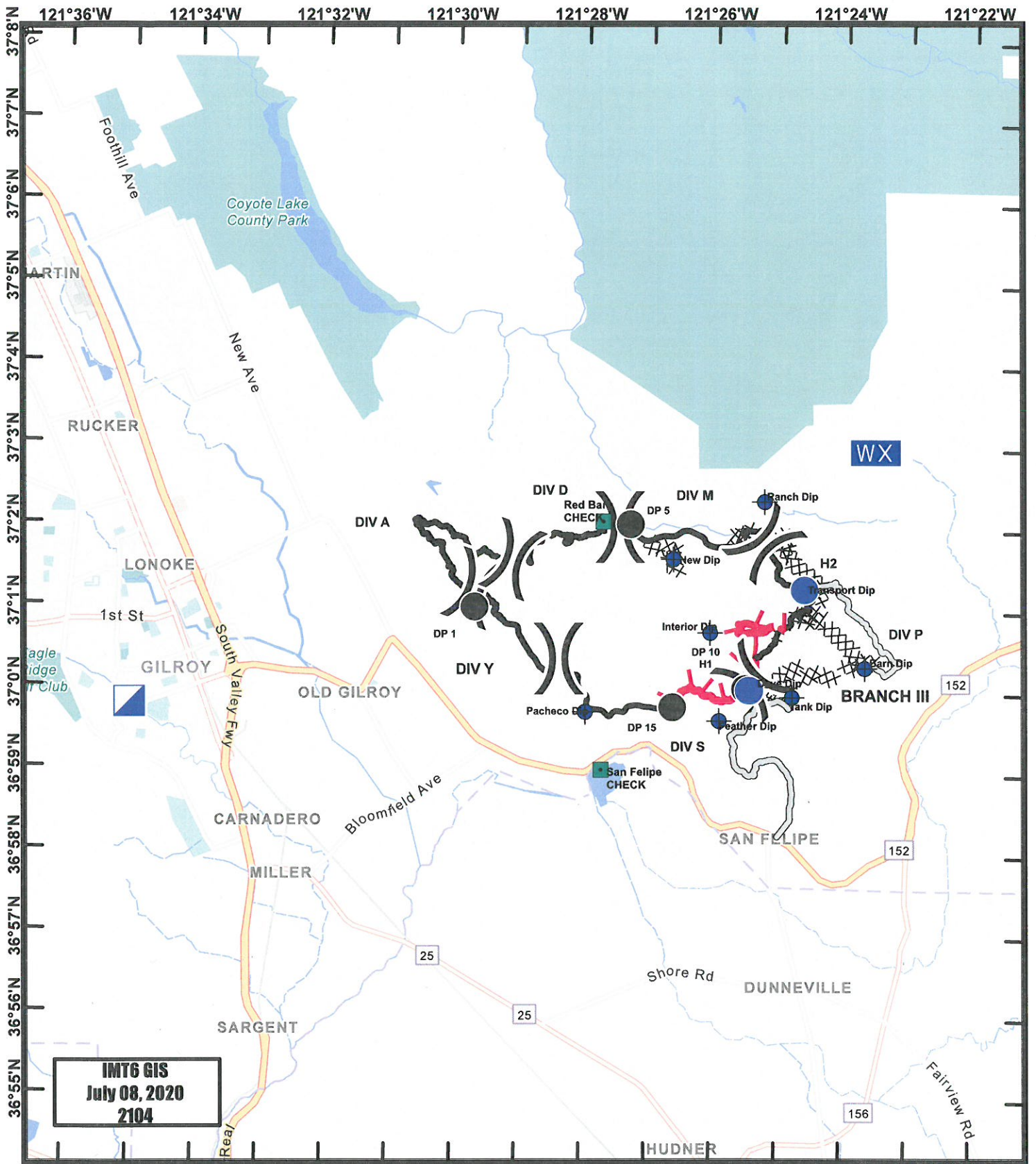
GROUND SUPPORT

FUEL

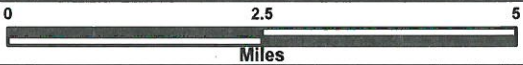
ICP



© 2020 Google



IMT6 GIS
 July 08, 2020
 2104



**Travel Map
 Crews Incident
 CA-SCU-004648
 July 9, 2020**



UNIT LOG (ICS 214)

1. Incident Name: **CREWS**

2. Operational Period: Date From: 7/9/20 Date To: 7/10/20
 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: _____ NIMS IAP

ACTIVITY LOG (ICS 214)

1. Incident Name: _____		2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Name: _____	4. ICS Position: _____	5. Home Agency (and Unit): _____	
6. Resources Assigned:			
Name		ICS Position	Home Agency (and Unit)
7. Activity Log:			
Date/Time	Notable Activities		
8. Prepared by: Name: _____ Position/Title: _____ Signature: _____			
ICS 214, Page 1		Date/Time: _____	