Thursday

*CORRECTED * INCIDENT ACTION PLAN CREWS INCIDENT

CA-SCU-004686





OPERATIONAL PERIOD

7/9/2020 0700

to

7/10/2020 0700



* CORRECTED *

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:		Operational Period:	Date From:	7/9/2020	Date To:	7/10/20:
CREWS			Time From:	0700	Time To:	0700
3. Objective(s):						
Management Objectives						
- Provide for emergency personne	el and public safety a	at all times.				
- Ensure COVID-19 precautions a	nd best practices are	e met at all times.				
- Protect property, improvements,	and infrastructure.					
- Ensure coordinated, timely and a	accurate release of p	oublic information.				
 Foster and maintain relationships 	with all cooperators	s and stakeholders.				
- Protect economic, natural, cultura	al and heritage resor	urces.				
- Maintain fiscal accountability and	keep costs commer	nsurate with values at i	risk.			
Control Objectives						
Keep the fire East of Crews Road	ı					
Keep the fire South of Henry Coe	State Park					
Keep the fire West of Highway 15						
Keep the fire North of Highway 15	52					
eneral Situational Awareness:						
Steep and rugged terrain, critically	dry and receptive for	uel beds, active area fo	or fire history and dr	ought stressed	troop	
		and and and and	ine motory and dit	odgrit stressed	trees.	
In the COVID-19 environment, high	h density population	s or large groups are n	enticulary at rick. To	holm masteret	16	
and to ensure all employees return				neip protect y	ourself, your	family
	make	Sure to practice social	distancing.			
Enhanced hygiene (especially hand	dwashing), PPE & n	nonitoring practices he	n limit the infection	rate of first room	nondous	
	O ,,	practice (10)	p in the the intection	iate of filst fes	ponders.	
Site Safety Plan Required?		□ No				
oproved Site Safety Plan(s) Locat	ed at:	*			25 80 7 (25	
Incident Action Plan ICS 203 ICS 21	-					
✓ ICS 203 ✓ ICS 21 ✓ ICS 204 ✓ ICS 22		ICS 205 A				
ICS 205 Facility		Training Message				
	er Forecast	Travel Map				
ICS 208 Fire Be		Demob Plan		ealth Message		
Prepared By: A. Mitchell		Finance Message on/Title: PSC	Signature:	11	0	
Approved by Incident Commande		rtin / J. Janssen	Signature:	July 1		_
S 202	D. IVIA	uur J. Janssen	Signature:		1	\exists
				a I		NIMS IAP

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: CRE		Period: Date From: Time From:		Date To: 7/10/2020 Time To: 0700
3. Incident Command	er(s) and Command Staff:	7. Operation Sect	ion:	
IC/UC's	J. Veik / R. Myers	Operations	T. Ernst / R. Jans	sen
Deputy	D. Martin (T) / J. Janssen (T)	Deputy Operations	S. Corn	
Safety Officer	J. Segura / J. Novak (T)	Night Ops	S. Lauderdale	
	R. Brocchini / R. Lubben (T)	Staging Area		J. Smith
	D. Pender / J. Kiszka (T) / R. Roberts (T)	Branch	101	S. Lane / L. Kalfsbeek (T) 12 H
4. Agency/Organization		Division/Group	A/Y/D	K. Ryan (12 hr) / M. Klusyk (T) (12hr)
Agency/Organization	Name	Division/Group	М	S. Rohrs / J. Burgess (T)
Santa Clara County OEM	 	Division/Group		L. Ermigarat / G. Dean (T)
Gilroy FD	M. Bisbee	Division/Group	S	M. Jonsson / D. Attebury (T)
Cal OES	D. Franklin		Suppresion Repai	
Santa Clara County Pub. Health	Dr. M. Fenstersheib	Branch		12.01.6
CHP	C. Armstrong	Division/Group		
CDCR	C. Schwartz	Division/Group		
Line Officer	M. Marcucci	Division/Group		
SC Co. Sheriff	T. Lera	Division/Group		
	B. Lutton			
CA State Parks	 	Division/Group	Water and Appearance in National	
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		
	T. Knecht	Division/Group		
	S. Volmer	Division/Group		
	R. Walbrun	Division/Group		
	S. Vargas / I. Crossley (T)	Air Operations Bra	inch:	Director: B. Kremensky
Training Footi Opeo	e. vargae / i. eroesiey (1)		Group Supervisor	
			Group Supervisor	
6. Logistics Section:			Helibase Manager	
	S. Dohman		. Ionbase Manager	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Deputy Chief		8. Finance/Admini	etration Costion:	L
			G. Belk	
Supply Unit				
	B. Luiz / J. Peckham	Deputy Chief		
Ground Support Unit			J. Navarro	
	J. Brooks / M. Heyforn (T)	Procurement Unit		
Medical Unit	S. McGary	Comp/Claims Unit		
		Cost Unit		
Prepared By: Name:	A. Mitchell Position/Title:		Signature:	
CS 203	Date/Time:	7/8/2020	2300 hours	NIMS IAI



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

Incident Meteorologist

FORECAST ISSUED: 2000 7/8/2020

... 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.

- 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.

Planning For Medical Emergencies

Supervisors and all firefighters need to ask and be able to answer the following three questions:

- 1) What are we going to do if someone gets sick or
 - Is there PPE, personnel and equipment available to assist?
- 2) Where and how will they be transported?
 - By air or ground?
 - Nearest hospital/trama center/burn unit?
- Has ALL proper notifications been made?
 - Contact Supervisor/Division
 - Contact Safety and Medical Unit leader

TAILGATE SAFETY

- · 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	Bv:	SOF1	
repared	Dy.	5011	

J. Segura / J. Novak (T)

Signature:

Date: 1/8/2020

2020

INCIDENT ACTION PLAN SAFETY ANALYSIS (ICS 215A)

1. Incident Name:	2. Operational Period:	Date From:	7/9/20	Date To:	7/10/20
CREWS		Time From:	0700	Time To:	0700
Incident Area	Hazard/Risks		Mitigations		
ALL	Prevent COVID-19 Transmiss	sion	Take part in da findings. Maintin consta Dont share pe	I distance of 6 ft. or aily self-assessmer ant hygiene, wash h ns or pass around workspace and ec	nt, report negative nands frequently paper to the group
ALL	Pre-Existing Medical Condition	nns	Report to sect Limit risk of ex Wear all appro	posure.	
ALL	Weather	710	and gusts.	tional awareness for	
ALL	Driving Hazards		Drive with hea Increase follow	ely! Expect the une dlights and seatbel ving distance. hocks and always l	ts on.
ALL	Poison Oak		after exposure	oid when possible, ons with MEDL and	
ALL	Hydration/Nurishment/Wellbe	ina	your shift. Wash or saniti Take breaks a	equently. Before, du ze hand before eat s needed. ourself and crew m	ing.
ALL	PPE (Infectious Disease)			propriate. o a mask, goggles, of an emergency.	and medical
ALL	Communications		Understand an Ensure instruct Brief others as	ou are in case you and ask COVID-19 m tions are clear and needed.	edical questions.
		- L			
5. Prepared By: J.Segura /	J.Novak (T) Position/Title	e: SOF1	7/	1	
CS 215A		2020 / 2020	91/1	In a	

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.

CONTROLLED UNCLASSIFIED INFORMATION//BASIC

CONTROLLED UNCLASSIFIED INFORMATION//BASIC

		1100	I O I TIVIL		1000 20		INFO	ORMATION//BASIC
1. Incident Name:			2. Operation	onal Period:			3. Branch	Division
CREWS			Date From		Date To: Time To:	07/10/20 0700	101	A/Y/D
4. Operations Personnel:			Time From	. 0700	Time To.	0700	Page 1 of 1	Alpha / Yankee / Delta
Operations Section Chief: T. Erns	f/R lane	RAN			Night One	S. Lauderd		Alpha / Yankee / Delta
Branch Director: S. Lane	Marine and the second of the second s		12 hr		Branch Safety		are	
Division/Group Supervisor: K. Ryan	CONTRACTOR OF STREET	CONTROL CONTRACTOR CONTRACTOR OF THE		**************************************	Air Attack	and any contraction to the contract of the con		en en e des hants d'es hancatis dell'ampril 1904 per 15 Messaya tide l'en Marie su Mindri (1920) 191 (1920) 191
5. Resources Assigned:	1 12 111 / 1				old are 12 Ho		T	
Resource Identifier	ALS			eader	Personnel		Hours	Reporting Location
STC NEU 9230C	7.20	1		Counts	16	E-17	0700-1900	CANADA X HWY 152
WT PVT E-27		+		(eylon	2	E-27	0700-1900	
WT PVT E-79				ewman	2	E-79	0700-1900	CANADA X HWY 152 CANADA X HWY 152
3. Work Assignments: Valk and validate control lines. mprove direct fire line. Mop up 3	300' in from	n contro	I line.					
7. Special Instructions:								
B. Communications								
Name	Ch	Ft	ınction	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
NIFC C1	2	co	MMAND	170.9750N	T1 - 110.9	168.7000N	T1 - 110.9	LOMA MUJERAS HP-DIV A/Y/D
CDF T26	, 5	TA	CTICAL	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	ME	DICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
GUARD7	16	AIR	GUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY
. Prepared by: Name:	M. Sel	zer		A	RESL	Signature:	111 1	
CS 204			Date/Time:	7/8/2020	2200	orgination		sonnel Count: 20
IIMS IAP							1 61	John Court. 20

CONTROLLED UNCLASSIFIED

1. Incident Name:			2 Opera	tional Period	- 1:00 2			ORMATION//BASIC
CREW	S		Date Fro	m: 07/09/20			3. Branch	Division M
4. Operations Personnel	:		111110110	0700	Time 10.	0700	- Boss 4 of	
Operations Section Chief: T. Er Branch Director: S. La Division/Group Supervisor: S. Ro	nst / R. Jans ine / L. Kalfs	beek (T			Branch Safet		Page 1 of '	Mike
5. Resources Assigned:	mara. Dul				Air Attac			
Resource Identifier	ALS		T		old are 12 Ho			
STC LNU 9141C	- IALO	LVVD		Leader	Personnel			Reporting Location
STG AEU 9275G				Aragon	16	E-68	0700-0700	JAMIESON X CANADA
WT PVT E-26		-		Drummond	33	C-8	0700-0700	JAMIESON X CANADA
WT PVT E-77		-		Merwin	2	E-26	0700-0700	JAMIESON X CANADA
VVI F V I E-77			D.	Sasser	2	E-77	0700-0700	JAMIESON X CANADA
b. Work Assignments: Construct and hold line utilizing mprove direct fire line. Mop up Valk and validate control lines	300' in from		line.					
. Special Instructions:								
Communications								
ame	Ch	Fur	nction	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
IFC C9	3	COM	IMAND	170.0125N	T1 - 110.9	165.2500N	T1 - 110.9	PACHECO PEAK-DIV M/DIV P/DIV S
DF T28	6	TAC	TICAL	151.1825N	T16 - 192.8	151.1825N	T16 - 192.8	FIDIV S
DF T15	14		GROUND		T16 - 192.8	159.2700N	T4C 400 0	AID TO OF
ALCORD	15		DICAL	156.0750N	T6 - 156.7	156.0750N	=======================================	AIR TO GROUND
JARD7	16		UARD	168.6250N	.0 100.1	168.6250N	T4 4400	MEDICAL COORDINATION
Prepared by: Name:	M. Selz			100.020014	RESL	Signature:	11-110.9 Matt	EMERGENCY USE ONLY
S 204		D	ate/Time:	7/8/2020	2200	Signature:	Pers	onnel Count: 53
S INC						CONTR		IED INFORMATION//BASIC

CONTROLLED UNCLASSIFIED

CONTROLLED UNCLASSIFIED INFORMATION//BASIC

		AOO	IGIAIAIL	IN I LIS	1100 20	- VAL	INF	ORMATION//BASIC
1. Incident Name:			2. Operati	onal Period:			3. Branch	Division
CREWS			Date From	: 07/09/20	Date To:	07/10/20	000	Б
ar e graffi			Time From	n: 0700	Time To:	0700		P
4. Operations Personnel:							Page 1 of 1	l Papa
Operations Section Chief: T. Erns					Night Ops	S. Lauderda	ale	
Branch Director: S. Lane	/ L. Kalfs	beek (T	12hr		Branch Safety	<i>r</i> :		
Division/Group Supervisor: L. Ermi	garat / G. I	Dean (T)		Air Attack		4	
5. Resources Assigned:		strate	Resources	Below in Bo	old are 12 Ho	ur **		
Resource Identifier	ALS	LWD	Le	eader	Personnel	Request #	Hours	Reporting Location
STC LNU 9140C			R. W	ettstein	16	E-148	0700-0700	PACHECO STATION
STG TCU 9447G			E. BI	akeway	32	C-6	0700-0700	PACHECO STATION
CRW XCC-CON CREW 12			A. B	runton	14	C-25	0700-1900	PACHECO STATION
WT PVT E-80			R. A	nderson	2	E-80	0700-0700	PACHECO STATION
WT PVT E-87			L. E	strada	2	E-87	0700-1900	PACHECO STATION
FEMT SCHMITZ			D. 8	Schmitz	1	0-114	0700-0700	PACHECO STATION
FEMP VALLELUNGA			R. Va	illelunga	1	O-115	0700-0700	PACHECO STATION
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	_	+			-			
		+				 	_	ļ
		+-+			 			
					 			
6. Work Assignments:								
Construct and hold line utilizing	direct taction	cs.						
Improve direct fire line. Mop up 3	300' in fron	n contro	l line.					
Walk and validate control lines.								
7. Special Instructions:								
B. Communications					7			
Name	Ch	Fı	unction	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
NIFC C9	3	co	MMAND	170.0125N	T1 - 110.9	165.2500N	T1 - 110.9	PACHECO PEAK-DIV M/DIV P/DIV S
/FIRE 25	7	TA	CTICAL	154.2875N	T6 - 156.7	154.2875N	T6 - 156.7	1.500
CDF T15	14		GROUND	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
CALCORD	15		DICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
GUARD7	16		GUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY
). Prepared by: Name:	M. Se				RESL		4 /	LIMENGENCY USE UNLY
						Signature:	Mal	4//
CS 204			Date/Time:	7/8/2020	2200	ga.u. u		somnel Count: 68
							1 61	Solution Count. 00

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1. Incident Name:		2. 0	Operation	nal Period	:		3. Branch	Division
CREW	S	Dat	e From:	07/09/20	Date To:	07/10/20	100	6
		Tim	e From:	0700	Time To:	0700		S
4. Operations Personnel:							Page 1 of	1 Sierra
Operations Section Chief: T. Er	nst / R. Jans	sen			Night Op	s: S. Lauderd	lale	
Branch Director: S. La	ne / L. Kalfs	beek (T) 🧗	2 hr		Branch Safet	y:		
Division/Group Supervisor: M. Jo	nsson / A+	tebery (T) 1	zhr/B	craess (T	Air Attac	k:		
5. Resources Assigned:		** Res	ources B	elow in B	old are 12 Ho	ur **		
Resource Identifier	ALS	LWD	Lead	der	Personne	Request #	Hours	Reporting Location
STC MRN 9150C			J. Pie	erce	18	E-205	0700-0700	JAMIESON X CANADA
STG LNU 9143G			J. Ga	lvin	26	C-5	0700-0700	JAMIESON X CANADA
CRW BEU GABILAN 3			W. G	ray	12	C-3	0700-1900	JAMIESON X CANADA
WT PVT E-78			C. A	⁄ila	2	E-78	0700-0700	JAMIESON X CANADA
WT PVT E-83		100	T. Ke	lly	2	E-83	0700-0700	JAMIESON X CANADA
FEMP POPE			R. Po	ре	1	O-238	0700-0700	JAMIESON X CANADA
FEMP WARREN			N. Wa	rren	1	O-239	0700-0700	JAMIESON X CANADA
					-			
					1	-	-	
								-
					 		 	-
Mork Applements								
 Work Assignments: Construct and hold line utilizing 	a direct to etic							
mprove direct fire line. Mop up								
Valk and validate control lines		control line.						
Special leaders of a second								
'. Special Instructions:								
Communications								
ame	Ch	Function	1 1	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
IFC C9	3	COMMAN		0.0125N	T1 - 110.9	165.2500N		PACHECO PEAK-DIV M/DIV
FIRE 26	8	TACTICA		54.3025N	T6 - 156.7	154.3025N	T1 - 110.9 T6 - 156.7	P/DIV S
DF T15	14	AIR TO GRO		9.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
ALCORD	15	MEDICA	L 15	6.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
JARD7	16	AIRGUAR	D 16	8.6250N		168.6250N	T1 - 110.9	
Prepared by: Name:	M. Selz	er	1		RESL		Mat	EMERGENCY USE ONLY
S 204		Date/	Γime: 7/8	/2020		Signature:		
IS IAP		Date/ I	11116. 7/6	12020	2200		Pers	sonné Count: 62

11

CONTROLLED UNCLASSIFIED INFORMATION//BASIC

		700		***************************************	1 (100 20	- war j		ORMATION//BASIC
1. Incident Name:		4	2. Operati	ional Period:			3. Branch	Division
CREWS			Date From		0 117007.03.711 27/203	07/10/20	60177	Suppression
			Time From	n: 0700	Time To:	0700		Repair
4. Operations Personnel:							Page 1 of	1
Operations Section Chief: T. Ernst	R. Jans	sen			Night Ops	S. Lauderd	ale	
Branch Director:					Branch Safety	:		
Division/Group Supervisor: E. Or	re				Air Attack	:.		
5. Resources Assigned:		strate	Resources	Below in Bo	old are 12 Ho	ur **		
Resource Identifier	ALS	LWD	Lo	eader	Personnel	Request #	Hours	Reporting Location
DOZ PVT E-35			T. Se	cramtim	2	E-35	0700-1900	CHRISTMAS HILL PAR
DOZ PVT E-39			T. E	Bishop	2	E-39	0700-1900	CHRISTMAS HILL PAR
DOZ PVT E-40			E.	Roen	2	E-40	0700-1900	CHRISTMAS HILL PAR
DOZ PVT E-41			C.	Avila	2	E-41	0700-1900	CHRISTMAS HILL PAR
CHIP PVT E-184			J. F	lagins	2	E-184	0700-1900	CHRISTMAS HILL PAR
WT PVT E-24				Owens	2	E-24	0700-1900	CHRISTMAS HILL PAR
WT PVT E-85			P.	Curry	2	E-85	0700-1900	CHRISTMAS HILL PAR
FOBS FAZIO				Fazio	1	O-26	0700-1900	CHRISTMAS HILL PAR
FOBS ORME			м.	Orme	1 1	0-79	0700-1900	CHRISTMAS HILL PAR
FOBS (T) MACKEWICZ			N. Ma	ckewicz	1	O-10	0700-1900	CHRISTMAS HILL PAR
DOR PUT E-34				WEST.	7	E-34	0700 - 1900	
		-						
					 			
6. Work Assignments:					1	Ĺ	<u> </u>	
dentify suppression repair needs.								
Knock down Dozer berms.								
	4.							
Nater bar dozer line per FSR nee	us.							
7. Special Instructions:								
100 mg = 11 100 mg	IFO 00 6		1					
f working in DIV M, P, S, utilize N	IFC C9 IC	or comm	nano.				9	
. Communications						*****		
Name	Ch	Fu	unction	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
NIFC C1								LOMA MUJERAS HP-DIV
	2		MMAND	170.9750N	T1 - 110.9	168.7000N	T1 - 110.9	A/Y/D
DF T35	9		CTICAL	159.3225N	T16 - 192.8	159.3225N	T16 - 192.8	
DF T15	14		GROUND	159.2700N	T16 - 192.8	159.2700N	T16 - 192.8	AIR TO GROUND
ALCORD	15		DICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	MEDICAL COORDINATION
Buarda de N	16		GUARD	168.6250N		168.6250N	T1 - 110.9	EMERGENCY USE ONLY
. Prepared by: Name:	M.Sel	zer			RESL		11. 1	m-
20.004						Signature:	VVVVV	• /
CS 204			Date/Time:	7/8/2020	2200		Per	sonnel Count: 17

CONTROLLED LINCLASSIFIED

1. Incident Name:		700		LIVI LIQ		O4 VAL)		FORMATION/BASIC
			1	tional Period			3. Branch	Division
CREWS			Date From		Date To	07/10/20)	Staging
4 Orașetiana Branco			Time Fro	m: 0700	Time To	0700		Staging
4. Operations Personnel:							Page 1 of	1
Operations Section Chief: T. Ern	st / R. Jan	ssen	Ave		Night O	ps: S. Lauder	dale	Section 4000 - 10100 - 10100 - 10100 - 10100 - 10100 - 10100 - 10100 - 10100 - 10100 - 10100 - 10100 - 10100 -
Branch Director:			y		Branch Safe	ety:	And the state of the same of the state of the same of	A particular of second color and second of the color of t
Division/Group Supervisor: J. Smi	ith				Air Atta	ck:		
5. Resources Assigned:		7	Resource	s Below in B	old are 12 H	our **		
Resource Identifier	ALS	S LWD	L	eader	Personne	el Request #	Hours	Reporting Location
		_						
							1	
							+	
								*
		+						
	_	+-+			-			
		+-+			-	+		
		1			+	-		
						1	 	
		+ +						
		+-+				-	 	
. Work Assignments:								
Maintain 3 minute response tim	e.							
Monitor command frequencies.								

. Special Instructions:								
. Communications			***					
ame	Ch	Fur	nction	Rx Freq	Rx Tone	Tx Freq	Tx Tone	N.A.
IFC C1	2							Notes LOMA MUJERAS HP-DIV
11001		CON	IMAND	170.9750N	T1 - 110.9	168.7000N	T1 - 110.9	A/Y/D
DF T15	14	AIR TO	GROUND	159.2700N	T16 - 192.8	159.2700N	T40 400 0	
ALCORD	15		DICAL	156.0750N	T6 - 156.7	159.2700N 156.0750N	T16 - 192.8	AIR TO GROUND
UARD7	16		UARD	168.6250N	10-100.7	168.6250N	T6 - 156.7	MEDICAL COORDINATION
Prepared by: Name:	M. Sel			.00.020014	RESL		T1 - 110.9	EMERGENCY USE ONLY
-	14-20-00-00-00-00-00-00-00-00-00-00-00-00-	(TV9).01				Signature:	Witt	h-
S 204		D	ate/Time:	7/8/2020	2200	oignaturo		sonnol County C
SIAP							ren	sonnel Count: 0

Incident Name / Number Sunrise Startup Cutoff Sunset CREWS / CA-SCU-804686 5:55 6:25 19:58 20:28 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 <u>DEGREES, MINUTES, DECIMAL MINUTES</u> 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 AOBB and Provide the Following	Incident Name / Number	The state of the s	The state of the last of the l				1500	9	Wednesd	Wednesday, July 8, 2020		Burke Kremensky	SKV
General Remar TRACK ALL TRACK ALL TRACK ALL All GPS DATA TO E AVOID Aerial App.		her	Sinrice	Starfun	Cutoff	Suncat	Shutdown	- Contract	aciterion C	Charles Daired	+		
General Remar TRACK ALL TRACK ALL I All GPS DATA TO E AVOID Aerial App. If Retardant / Foam / Ags	CREWS / CA-SCU-004686	36		6:25	19:58	20:28	20:58	58	Thursda	Thursday July 9, 2020		Operational Period 0700-2100	00 00
TRACK ALL I TRACK ALL I All GPS DATA TO E AVOID Aerial App If Retardant / Foam / Age	rks, Safety N	General Remarks, Safety Notes, Hazards, Air Operati	Air Operat	ions Spe	ions Special Equipment, etc.	ent, etc.	Helibase Information	formation	TFR	TFR Information		Rescue Ship Information	ormation
TRACK ALL I All GPS DATA TO E AVOID Aerial App If Retardant / Foam / Age	. DIPSITE LC	TRACK ALL DIPSITE LOCATIONS / NUMBER OF DIPS / GALLONS TAKEN	ABER OF I	DIPS / G/	ALLONS TAP	CEN.	Name 5	Name San Martin	Request #	A-72		Day Hoist	Night Holst
All GPS DATA TO E AVOID Aerial App If Retardant / Foam / Age	DROP LOCA	TRACK ALL DROP LOCATIONS / NUMBER OF DROPS / GALLONS DROPPED	R OF DRO	DPS / GAL	LONS DRO	PPED	Latitude 37 04 53.07	37 04 53.07	Polygon:			Name 840	840
AVOID Aerial App If Retardant / Foam / Age	SE COLLECT	ED IN DEGREE!	S. MINUTE	ES, DECIN	JAL MINUTE	S FORMAT.	Longitude 121 350 48.5	121 350 48.5	Altitude:	3,500 MSL		Phone (650)245-1715	(650)245-1715
If Retardant / Foam / Age	vilcation of Retai	dant / Foam / Agent	within 300' c	of Waterway	's, Bodies of W.	ater, etc.			Centernoint:	37 00.42 Lat	Make	Make/Model UH-60G	DO9-HO
Informatio	ant is Dropped V	Within These Areas In	mmediately I	Notify the AC	OBD and Provis	de the Following	Name		oci nei ponne.	121 27.20 Long	Ž	Location San Martin	San Martin
	חוי רפון רחות, ד	o legunat negenito	dancins and	a map bel	aming the Area		Latitude	. 14	NOTAMS:	8/6883		Request Procedure for These Aircraft:	These Aircraft:
							Longitude	Chopology	Frequency	125.8250		Incident Communications	nications
Frequencies	ř	Tone	8	-	Tone	AM / FM	Dosition		Name Name	Dhone	+	Trains Dhan	Additional Info
Command	165 2500	F	170 0125	125	110 9000	EW	AORD	Z Z	и Ктополем	2001	+	- I allied	aliona
AIR / GROUND - TACTICAL	1	+	159.2700	700	192,8000	N.	ASGS	N N	N Mateoli		+		
AIR/AIR ROTARY WING	1	+	125.8250	250		AM	HEBM	¥	K Hill		-		
Helco Briefing	+												
AIR TACTICS	169,2875	75	169.2875	875		MH							
Air Attack Briefing						AM	HLCO	Leiuan/	Leiuan/Renner				
TOLC	123.0250	20	123.0250	250		AM	AAML						
DECK	163.1000	00	163.1000	000		FM	HLCO				-		
CALCORD - MEDICAL	-	750 156.7 (6)	156.0750	750	156.7 (6)	FM	ATGS						
AIRGUARD - Emergency Only	Only 168,6250	(1) (1) (1)	168.6250	250		FM							
	4				五	HELICOPTERS (Use page 2 if Needed)	se page 2 If No	eeded)					
FAA# Type		Make/Model Helibase	Avail	Start	Ren	Remarks	FAA#	Type	Make/Model Helibase	L	Avail	Start	Remarks
242BH III	206L3	3 San Martin	0800	0830	Helcc	Helco/Recon				L	┝	L	
ATV	AS350B	OB San Martin	0800	0830	Helco	Helco/Recon							
3461 11	B2126	Son Martin	0000	0830	Bucket 1	Bucket 11 Standard					1		
+	DZ 123	+	300	0000	Ducket, L	L, Standard					+		
	00212	++	0000	0000	Ducket, 1	Ducket, LL, Standard					$\frac{1}{1}$		
	+												
82BH I	UH60A	A San Martin	0800	0830	Buc	Bucket, LL							
	+												
										$\frac{1}{1}$			
					Ę	FIXED WING (Use Page 2 if Needed)	Page 2 if Nev	eded)					
FAA# Type	e Make/Model	lodel Base	Avail	Start	Remarks		FAA #	Type	Make/Model	Base Av	Avail	Start Remarks	
										\vdash	H		
										-			

PLAN	
IUNICATIONS PLAN	
OMMUNIC	The state of the s
RADIO C	
5 - INCIDENT RADIO COMMUN	
ICS 205 -	-

1. Comm	CREWS		2. Date/Time Prenared		,			INTORINATION/BASIC
Comin 2 2 2 2 C	C/MUAC		- each mile i chaien		3. Operatic	3. Operational Period		
Com 1 2 2 2	Incident Channels	Saloud	Date:		07/08/2020 Date From:	07/09/20	Date To:	07/10/20
年 - 2	4. Communications		Time:	e: 1930	Time From:	0020	Time To:	0700
	Limotion							
	nicalon in	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
_								
	COMMAND	NIFC C1	ALL DIVISIONS	170.9750N	T1 - 110.9	168.7000N	T1 - 110.9	LOMA MILIERAS HP. DIV A VVID
0 m	COMMAND	NIFC C9	ALL DIVISIONS	170.0125N	T1 - 110.9	165.2500N	T1 - 110 a	
4							6.0	FACHECO PEAK-DIV M/DIV P/DIV S
5 1/	TACTICAL	CDF T26	DIV A/D/Y	159.2925N	T16 - 192 8	159 2925N	T16 100 0	
9 1/	TACTICAL	CDF T28	DIVM	151.1825N		_	T46 400.0	
7	TACTICAL	VFIRE 25	DIVP	154.2875N		_	70 470 -	
8 TA	TACTICAL	VFIRE 26	DIVS	154 3025N	TE 156.7	NO 102.40	7.961 - 91	
9 T	TACTICAL	CDE T35		10700:101		154.3025N	16 - 156.7	
10		8	SUPP KEPAIK	159.3225N	T16 - 192.8	159.3225N	T16 - 192.8	~
7								
-								
12								
13 TA	TACTICAL	VTAC14	RADIO BRIEFING	159.4725N	T6 - 156 7	150 A725NI	1077	
14 AIF	AIR TO GROUND	CDF T15	ALL DIVISIONS	_	T16 102 0	150.712.014		
15 ME	MEDICAL	CALCORD	ALL DIVISIONS		T6 - 156 7	158.2700IN		AIR TO GROUND
16 AIF	AIRGUARD	GUARD7	ALL DIVISIONS	168 6250N		100.00 00 00 00 00 00 00 00 00 00 00 00 0		MEDICAL COORDINATION
17						N0020.001	11 - 110.9	EMERGENCY USE ONLY
18								
19								
20 AIR		GUARD7	ALL DIVISIONS	168.6250N		160 COEON!		
pecial	5. Special Instructions					NOCZO.OO!	11 - 110.9 E	5. Special Instructions

1930

NIMS IAP Date/Time: 07/08/20

Signature:

6. Prepared by (Communications Unit Leader): Name: JOHN BROOKS, IMT 6 COML

ICS 205 - CONTROLLED UNCLASSIFIED INFORMATION//BASIC

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

VTAC14

MEDICAL PLAN (ICS 206)

				(100 20					
1. Incident Name:				2. Operational Per	riod:	Date From:	7/9/20	Date To:	7/10/20
	CREWS					Time From:	0700	Time To:	0700
3. Medical Aid Stations:									
Name				Location		Contact Nu		Para	medics
CAL MAT		ICP		-		916-247-194 Comms	10/Crews		Yes
4. Transportation (indicate a		und):						-	
Ambulance Serv				Location		Contact N	Number	Level o	f Service
AMR Santa Clara Medic 50 (G	round)	Canada an	d HWY	152	- (Crews Comr	ns	A	LS
AMR Santa Clara Medic 58 (G	round)	Canada an	d HWY	152	(Crews Comn	ns		LS
CAL STAR (Air)		Gilroy			(Crews Comn	ns		LS
Guard 840 (Air)		St. Martin H	lelibase	9	(Crews Comn	ns		LS
5. Hospitals:									
		Address,	C	ontact Number(s)/	Tra	vel Time	1		
Hospital Name	Lat	t & Long Helipad	7 ~	Frequency	Air		Trauma	Burn	
Saint Louise Regional Med	9400 No Lat/Long	9400 No Name Uno, Gilroy, CA Lat/Long: N37.02.13, W121. 34.27		9848-8680	5 MIN	Ground 10 MIN	Center	Center	Helipad
Regional Medical Center	225 North Jackson Ave., San Jose, CA 95116-1691, Lat/Long: N37.18.85, W121.56.05			259-5000	10 MIN	30 MIN	Level 2		>
Fanta Clara Valley Medical Center 751 S. Bascom Ave., San Jose, CA 95128, Lat/Long: N37.18.85, W121.56.05				885-5000	10 MIN	40 MIN	Level 1		\checkmark
6. Special Medical Emergency	y Proced	ures			<u> </u>				
Crew Supervisor will contact Division S complaint/condition and location. - Division Group Supervisor Contacts: 1. Closest EMS resource 2. Communications Unit - Communications Unit Contacts: 1. Ground or Air ambulance as request 2. Operations 3. Safety 4. Medical Unit - Division Supervisor or designee will serun medical emergency on assigned of the for IWI and only for duration of the effort IWI and only for duration of the effort IWI and only for duration of the new communications Unit will clear the Cotraffic as needed for duration of the new contact Medical Unit with patient complained and the communications contact Medical Unit contacts 1. Communications 2. Safety 3. Logistics 4. Operations 5. Crew Supervisor	erve as poir hannel. .e. CALCOF emergency. mmand cha ed.	nt of contact and RD) should be used annel for emergency	Natu Loca Point Trans Point Patie Is an Age:	y Reporting Proced re of Injury: tion of Patient: t of Contact: sportation Request t of Pick-Up: Lat: nt Unit ID: EMT with Patient: \ Sex: Male Emergencies - Secundary vents.	ted by: / Lor Yesle	Air Gro	und		
6. Comp/Claims Check box if aviation asset. Prepared by (Medical Unit Le	eader):	ized for rescue. If a	ssets a		with Air Signatu	· IA	Mex	Lug	
Approved by (Safety Officer)):	I Comune / I N	. (T)			1	-11	1	
S 206	NIMS IAP	J. Segura / J. Nova	ak (1)	Date/Time:	Signatu	re: <u>(</u>	7-8-20 180	gura 00	

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:

- O THE DEMOB UNIT WILL INFORM YOU IF THE VEHICLE NEEDS TO BE INSPECTED.
- O 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 <u>California State Penal Code Section 409.5(d)</u> 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

	Mary Carlot	EMERGE	NCV SHIET	TICK	ET and EVA	MOLTALLIA	EOPM		NC.	ontra	ctor Name		
		LINEITOL	1401 01111 1	1101	CT and EV	LOATION	ONW		Ŭ.	Jona	DOZEF	R DL	JDE
Incident or Pr	oject Name			Incider	nt Number		Request Numi	per	O	perat	or #1	Oper	rator #2
	CREW	S FIRE			CASCU0	04686	E	# HERE			BOB SMITH		
Agreement Nur		//// O	00000	0	^						Operator Fu	irnish	ed By:
		XXX - 0	00000	- 00						Х	Contractor		Government
Equipment Mak		_			Equipment Mod	5.50			-		Operating Suppli	es Fu	rnished By:
	CA	1			<u> -</u>		D6XM			X	Contractor		Government
Serial Number					Licence Numbe						Equipme	nt Sta	tus
	1	11111					111111			X	Inspected	X	Under Agreement
Date			E	quipn	nent Use	Paramana Maria	-7 10				Released by Government		_
Mo / Day	Start	Stop	Work	Γ	(Circle) Hours Days / Miles Assignment					_	Withdrawn by Contractor	The same of	
				-					—— K	tema	arks/Comments **		
7/8	0001	700	7		OFF SHIFT					4 4	OPERATOR		
7/8	0700	1900	12		SUF	PRESS	ION RE	PAIR	- 1			~ (NI AIRAO
7/8	1900	2400	5			OFF	SHIFT	3 ata-at	1	IAC	DAMAGE/ N	U	LAIMS
				/endo	r Rating				Go	ovt. R	ep. Name and Position - PRINT		
			Po	or*	Avg.	Good	Exc.	N/A			Mike V	Veb	er
Met Perforn						2			Go	Govt. Rep. Signature			
Equipment in Safe Working Condition Vendor Ra					Ratir	ting Mike Weber			rer				
Operator Sk	ill Level				V CII	aoi	Nacii	18 -	Co	Contractor Signature			
Operates Sa	afely				muc	st be	don			Bob Smith			
Operator's (Cooperation	Level			mus	or ne	uon	c. –	Dat	Date Time			
Overall Perf	ormance										07/08/20		0800
								Comment Se					CALFIRE 297
5:-1-	Finance	**Final e	evaluation c	r for n	nore docume HE Coordin	entation, us		rm 230 or ed	quivalent	t.	White - Govt Repre		(Rev 3-2011)

		· ·								
		EMERGE	NCY SHIFT	TICKET and EVALUATION	FORM	Contra	Contractor Name			
		The resp	onsible Governm	nent Officer will complete this form each	n shift		TRANSPORT	COMPANY		
Incident or Proje		0 5155		Incident Number	Request Number	Opera		Operator #2		
	CREW	S FIRE		CASCU 004686	E # Here		BOB SMITH			
Agreement Nun	nber						Operator Fun	nished By:		
			XXX	- 000000 - 00		Х	Contractor	Government		
Equipment Mak				Equipment Model / Type	#5.000 \$000.000 (Accessor #50.0		Operating Supplies	s Furnished By:		
	PET	ERBUIL.		3S2	18 WHEEL	X	Contractor	Government		
Serial Number	11/0050	MD4400	0040	Licence Number			Equipment	Status		
	IXP3ES	MP1423			9999999	Х	Inspected	X Under Agreement		
			E	quipment Use			Released by Government			
Date				(Circle) (Hours) [Days / Miles		Withdrawn by Contractor			
Mo / Day	Start	Stop	Work	Ass	ignment	Rem	arks/Comments **	100000		
7/8	0001	700	7	OFF	SHIFT	110	PERATOR			
7/8 0700 1900 12 SUPPRESSION REPAIR								0.01.41040		
7/8	1900	2400	5	OFF	SHIFT		DAMAGE/ NO	CLAIMS		
			V	endor Rating		Govt. R	ep. Name and Position - PRINT			
			Po	or* Avg. Good	Exc. N/A		Mike W	eber		
Met Perform				_ 、, ,		Govt. R	ep. Signature			
Equipment in Safe Working Condition Vendor Rating					Rating _		Mike Weber			
Operator Skill Level						Contrac	Contractor Signature			
Operates Safely must be done.							Bob Smith			
Operator's C	Cooperation	Level		- must be	done. —	Date		Time		
Overall Perf	ormance						07/08/20	0800		
				ting of POOR requires an ex				CALFIRE 297		
Pink -	Finance	rinal	Riue - Home	or for more documentation, u	Ise an ICS Form 230 or eq	uivalent.	White Cout Decree	(Rev 3-2011)		

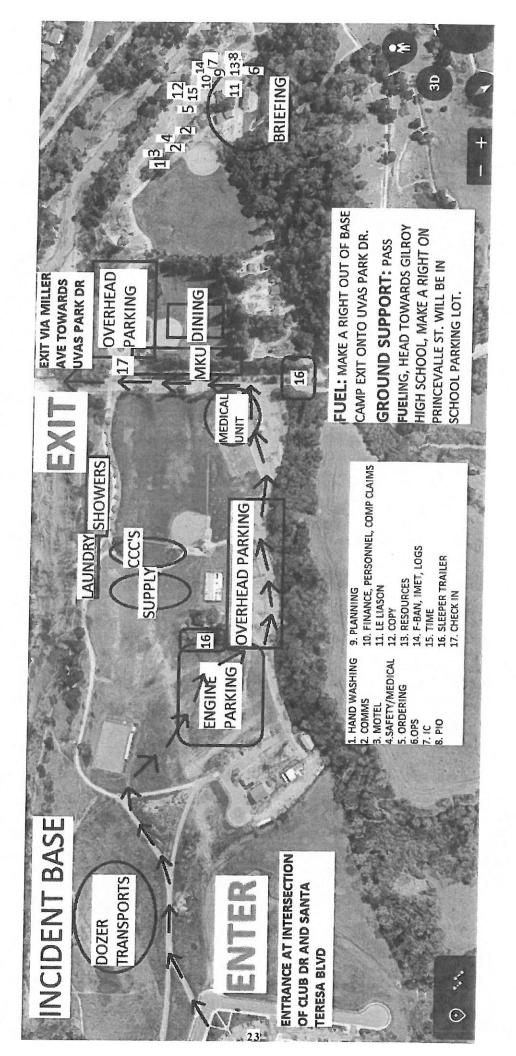
Turn shift tickets into Finance.

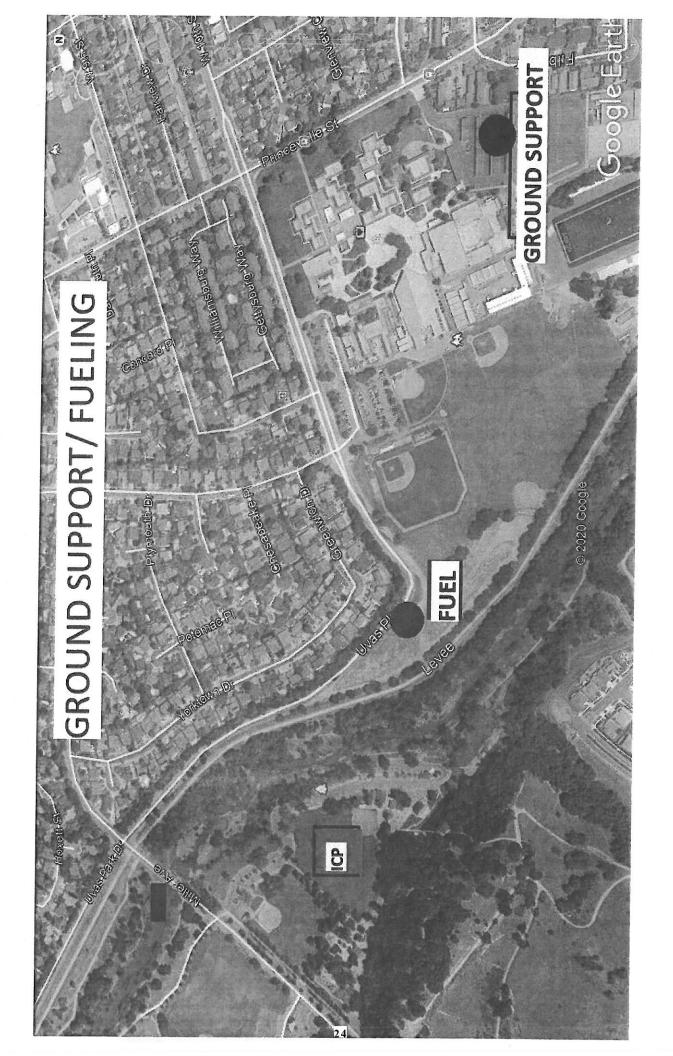
Incident#:

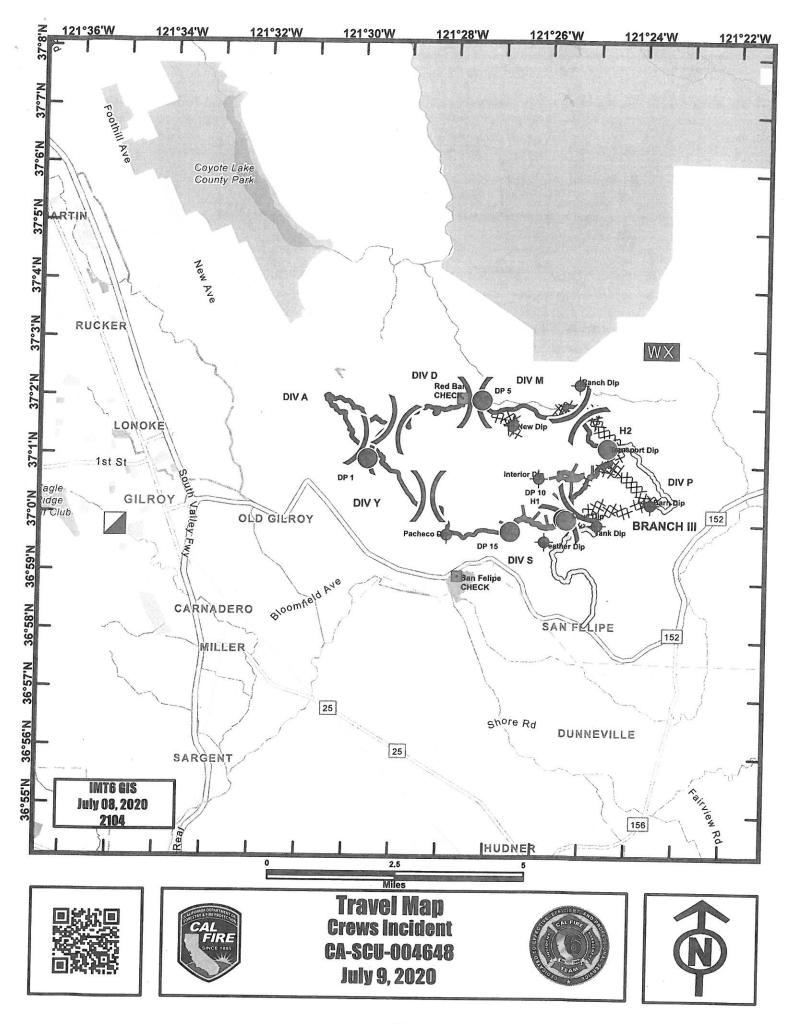
STATE OF CALIFORNIA
DEPARTMENT OF FORESTRY AND FIRE PROTECTION
PROPERTY CERTIFICATION OF LOCATION OR DAMAGE
CERTIFICATE OF RESPONSIBILITY FOR INCIDENT OCCURRANCE

Request #:

CERTIFICATE OF RESPONSIBILITY FOR INCIDENT OCCURRANCE TO DOC. NUMBER: CAL FIRE-101 page 1 of 2 (1/07)									
LOCATION / INCI	DENT NAM	E:	INCIDENT NUMB	BER:	UNIT:	REGION:	DATE:		
		9.	 ken, left on line, dan	naged, or other)	<u></u>		DATE OF	OCCURANCE:	
QUANTITY	UNIT OF	CAL FIRE	STOCK NUMBER		DESCRIP MODEL, TYPE, ETC F DATA TO EFFECT	TION TO CLEARLY DESCRIENT TIVELY IDENTIFY EQUIPMENT	BE THE ITEM, MENT OR	PROPERTY NUMBER	
QUANTITI	MEAS.	(COMPLETE W	HENEVER ASSIGNED)	PROVIDE ADECOM	PROPER	IY.)			
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				•					
DIV:		D	iv's Nan	ne:		•.			
Div.	Signa	ature	0 B						
Attentio	n Divisio	on Group S and / or F	Sup., by signin	ıg you are auth	orizing the	above items t	o be repla	aced by	
trie supp	Jiy Office								
LOCATION OF IT	EMS:								
REMARKS:									
		· · · · · · · · · · · · · · · · · · ·							
	ŕ								
SIGNATURE OF PERSON CERTIFYING OCCURANCE AS DESCRIBED									
SIGNATURE:			PRINTED NAME:		TITLE:		DATE:		
		,	UNIT SU	JPERVISOR'S A	PPROVAL				
COMMENTS:						ž ,			
SIGNATURE OF U	JNIT ADMIN	ISTRATOR:			TITLE:		DATE:		







	UNI	T LOG (ICS 214)							
1. Incident Name: CREWS		2. Operational Period:	Date From: Time From:	7/9/20	Date To:	pay and it is the transferred and			
3. Unit Name/Designators		4. Unit Leader (Time From: 0700 Time To: 070 4. Unit Leader (Name and ICS Position)						
5. Personnel Assigned/Designators									
NAME		ICS POSITION		HOME I	BASE				
				6					
6. Activity Log (Continue on Reverse)									
TIME		MAJOR EVE	-NTS						
		W/WOILER							
Prepared By:		Date/Time:			**************************************	NIMS IAP			

ACTIVITY LOG (ICS 214)

1. Incident Name	:	2. Operational Period: Da	ate From: Date To: me From: Time To:
3. Name:		4. ICS Position:	5. Home Agency (and Unit):
6. Resources As	signed:		
N	ame	ICS Position	Home Agency (and Unit)
7. Activity Log: Date/Time	Notable Activities	***	
*		***************************************	
8. Prepared by: N	ame:	Position/Title:	Signature:
ICS 214, Page 1		Date/Time:	