# INCIDENT ACTION PLAN FAY INCIDENT

CA-KRN-032853 CA-SQF-000996





### **OPERATIONAL PERIOD**

7/16/2025 0700

to

7/17/2025 0700



# **INCIDENT OBJECTIVES (ICS 202)**

| 1. Incident Name:                                  | 2. Operational Period:       | Date Fr      | rom:      | 7/16/2025     | Date To:    | 7/17/2025   |
|--|------------------------------|--------------|-----------|---------------|-------------|-------------|
| Fay  |                              | Time Fi      | rom:      | 0700          | Time To:    | 0700        |
| 3. Objective(s):                                   |                              |              |           |               |             |             |
| Management Objectives                              |                              |              |           |               |             |             |
| - Provide for emergency personnel and public sat   | fety at all times.           |              |           |               |             |             |
| - Protect property, improvements, and infrastructu | ure.                         |              |           |               |             |             |
| - Ensure coordinated, timely and accurate release  | e of public information.     |              |           |               |             |             |
| - Maintain fiscal accountability and keep costs co | mmensurate with values at    | risk.        |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
| Control Objectives                                 |                              |              |           |               |             |             |
| Keep the fire North of Glacier Gulch Road.         |                              |              |           |               |             |             |
| Keep the fire South of Bartolas Creek.             |                              |              |           |               |             |             |
| <sup>-</sup> Keep the fire East of Fay Ranch Road. |                              |              |           |               |             |             |
| - Keep the fire West of Bartolas Road.             |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
| General Situational Awareness:                     |                              |              |           |               |             |             |
| Steep and rugged terrain, critically dry and rece  | ptive fuel beds, active area | for fire his | story and | drought stres | ssed trees. |             |
|  |                              |              | -         | -             |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
| 5. Site Safety Plan Required?                      | Yes □ No ☑                   |              |           |               |             |             |
| Approved Site Safety Plan(s) Located at:           | - —                          |              |           |               |             |             |
| Source   Say                                       |                              |              |           |               |             |             |
| ☑ ICS 203 ☐ ICS 215A                               | ☐ ICS 205 A                  |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  |                              |              |           |               |             |             |
|  | =                            |              |           |               |             |             |
|  |                              | 0: :         |           |               |             |             |
|  | Position/Title: PSC          | •            | ·         |               |             | <del></del> |
|  |                              | Signatu      | ıre:      |               |             |             |
| 103 202  |                              |              |           |               |             | NIMS IAP    |

#### **ORGANIZATION ASSIGNMENT LIST (ICS 203)**

| 1. Incident Name:      |  | 2. Operational  | Period: Date From: | 7/16/2025          | Date To:  | 7/17/2025 |
|------------------------|--|-----------------|--------------------|--------------------|-----------|-----------|
| Fay                    |  |                 | Time From:         | 0700               | Time To:  | 0700      |
| 3. Incident Command    | <del>, ` ' '                                </del> |                 | 7. Operation Sect  | ion:               |           |           |
|                        | J. Gagnon / J. Erw                                 | /in             | Operations         |                    |           | _         |
| Deputy                 | <del> </del>                                       |                 | Deputy Operations  |                    |           |           |
| Safety Officer         | <del> </del>                                       |                 | Night Ops          |                    | 1         |           |
| Information Officer    | ļ  |                 | Staging Area       |                    |           |           |
| Liaison Officer        |  |                 | Branch             |                    |           |           |
| 4. Agency/Organization | 1  |                 | Division/Group     | A                  | TBD       |           |
| Agency/Organization    |  | me              | Division/Group     | D                  | TBD       |           |
| CALFIRE                | C. Bogan   |                 | Division/Group     | L                  | TBD       |           |
|                        |  |                 | Division/Group     | 0                  | TBD       |           |
|                        |  |                 | Division/Group     | Q                  | TBD       |           |
|                        |  |                 | Division/Group     | Z                  | TBD       |           |
|                        |  |                 | Branch             |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
|                        |  |                 | Division/Group     |                    |           |           |
| 5. Planning Section:   |  |                 | Division/Group     |                    |           |           |
|                        | J Schillinger                                      |                 | Division/Group     |                    |           |           |
|                        | B. Corey   |                 | Division/Group     |                    |           |           |
| Resource Unit          | <del>-</del>                                       |                 | Division/Group     |                    |           |           |
| Situation Unit         | <b>+</b>   |                 | Division/Group     |                    |           |           |
| Documentation Unit     | <b>\</b>   |                 | Division/Group     |                    |           |           |
| Demobilization Unit    | <b>\</b>   |                 | Division/Group     |                    |           |           |
| GISS                   |  |                 | Division/Group     |                    |           |           |
| FBAN                   | 1  |                 | Division/Group     |                    |           |           |
| IMET                   |  |                 | Division/Group     |                    |           |           |
| Training Tech Spec     |  |                 | Air Operations Br  | ranch              | Director: |           |
| Training recir opec    |  |                 | -                  | Group Supervisor   | Director. |           |
|                        |  |                 |                    | Group Supervisor   |           |           |
| 6. Logistics Section   |  |                 |                    | Helibase Manager   |           |           |
|                        | M. Crist   |                 |                    | Helibase Manager   |           |           |
| Supply Unit            | +  |                 | 8. Finance/Admin   | istration Section: |           |           |
| Facilities Unit        | <del> </del>                                       |                 | Chief              | i                  |           |           |
| Ground Support Unit    | <del> </del>                                       |                 | Time Unit          |                    |           |           |
|                        | ļ  |                 | +                  | -                  |           |           |
| Communications Unit    | 1  |                 | Procurement Unit   |                    |           |           |
| Medical Unit           |  |                 | Comp/Claims Unit   |                    |           |           |
|                        |  |                 | Cost Unit          |                    |           |           |
| Prepared By: Name:     | N LaCount  | Position/Title: | PSC                | Signature:         |           |           |
|                        | N. Lacount   |                 |                    | -                  |           |           |
| ICS 203                |  | Date/Time:      | 1/15/2025          | 2300 hours         |           | NIMS IAP  |

| Weather Forecast  | Latitude:              | Longitude: |         |          |         |  |
|-------------------|------------------------|------------|---------|----------|---------|--|
| 1. Incident Name: | 2. Operational Period: | Date From: | 7/16/25 | Date To: | 7/17/25 |  |
| Fay               |                        | Time From: | 0700    | Time To: | 0700    |  |

```
Sky/weather.....Sunny (0-5 percent).
```

Max temperature....94-98.

Min humidity.....17-21 percent.

Eye level winds.....West winds up to 6 mph increasing to southwest

8 to 13 mph in the afternoon.

Surrounding ridge...West winds up to 20 mph in the afternoon, wind  $% \left( 1\right) =\left( 1\right) \left( 1\right)$ 

gusts up to 30 mph.

Mixing height.....9500-10000 ft AGL.

Transport winds.....West around 12 mph.

Wind (20 ft).......West winds 5 to 10 mph increasing to southwest 14 to 22 mph in the afternoon, wind gusts up to

30 mph.

#### .WEDNESDAY NIGHT...

Sky/weather.....Clear (0-10 percent).

Min temperature....62-66.

Max humidity.....45-50 percent.

Eye level winds.....West winds 7 to 13 mph shifting to the

northwest up to 5 mph overnight.

Surrounding ridge...West winds 10 to 15 mph shifting to the

northwest up to 5 mph overnight.

Mixing height.....2000-2500 ft AGL.

Transport winds.....Northwest around 10 mph.

Wind (20 ft).....West winds 12 to 21 mph shifting to the

northwest 6 to 9 mph overnight.

| 1. Incident Name:          |         |           | 2. Operation | nal Period: | -              | ,          | 3. Branch          | Division                 |  |
|----------------------------|---------|-----------|--------------|-------------|----------------|------------|--------------------|--------------------------|--|
|                            | Fay     |           | Date From:   | 07/16/25    | Date To:       | 07/17/25   |                    | Λ                        |  |
|                            |         |           | Time From:   | 0700        | Time To:       | 0700       |                    | Α                        |  |
| 4. Operations Pers         | sonnel: |           |              |             |                |            | Page 1 of 1        | Alpha                    |  |
| Operations Section Chief:  |         |           |              |             | Night Ops:     |            | •                  |                          |  |
| Branch Director:           |         |           |              |             | Branch Safety: |            |                    |                          |  |
| Division/Group Supervisor: |         | 1         |              |             | Air Attack:    |            |                    |                          |  |
| 5. Resources Assign        | ned:    |           |              |             |                | ı          |                    |                          |  |
| Resource Identifier        |         | ALS LWE   | Le           | ader        | Personnel      | Request #  | Hours              | Reporting Location       |  |
| ENG3 ST TBD                |         |           |              |             |                |            |                    | ICP                      |  |
| ENG3 ST TBD                |         |           |              |             |                |            |                    | ICP                      |  |
| WTT2 TBD                   |         |           |              |             |                |            |                    | ICP                      |  |
| WTT2 TBD                   |         |           |              |             |                |            |                    | ICP                      |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
| 6. Work Assignment         | s:      |           |              |             |                |            |                    |                          |  |
| Construct and improv       | e line. |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
| 7 Omenial Instruction      |         |           |              |             |                |            |                    |                          |  |
| 7. Special Instructio      | ns:     |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
|                            |         |           |              |             |                |            |                    |                          |  |
| 8. Communications          |         |           |              |             |                |            |                    |                          |  |
| Name                       | Ch      | Function  | Rx Freq      | Rx Tone     | Tx Freq        | Tx Tone    | Mode               | Notes                    |  |
| SQF 4                      | 1       | COMMANI   | 170.5500     |             | 166.0000       | MPL        |                    |                          |  |
| NIFC T1                    | 2       | TACTICAL  | 168.0500     | 0.0         | 168.0500       | 0.0        | Α                  |                          |  |
| A/G COMMAND                | 14      | A/G CMD   | 167.8125     |             | 167.8125       |            |                    |                          |  |
| CALCORD                    | 15      | TACTICAL  | 156.0750     | (T6) 156.7  | 156.0750       | (T6) 156.7 | А                  |                          |  |
| AIR GUARD                  | 16      | EMERGENC' | 168.6250     |             | 168.6250       | T-1, 110.9 |                    |                          |  |
| 9. Prepared by: Nam        | ie:     | N. LaCoun | t            | •           | RESL           | •          | •                  | •                        |  |
|                            |         |           |              |             |                | Signature: |                    |                          |  |
| ICS 204                    | ]       |           | Date/Time:   | 7/15/2025   | 2200           |            | Personnel Count: 0 |                          |  |
| NIMS IAP                   | 1       |           |              |             |                | 2017       |                    | IEIED INEODMATION//DACIC |  |

|                            |        |           |              |             | 1.00 _0        | ,             |             | RMATION//BASIC     |
|----------------------------|--------|-----------|--------------|-------------|----------------|---------------|-------------|--------------------|
| 1. Incident Name:          |        |           | 2. Operation | nal Period: |                |               | 3. Branch   | Division           |
|                            | Fay    |           | Date From:   | 07/16/25    | Date To:       | 07/17/25      |             | D                  |
|                            |        |           | Time From:   | 0700        | Time To:       | 0700          |             | D                  |
| 4. Operations Pers         | onnel: |           | •            |             |                |               | Page 1 of 1 | Delta              |
| Operations Section Chief:  |        |           |              |             | Night Ops:     |               | •           |                    |
| Branch Director:           |        |           |              |             | Branch Safety: |               |             |                    |
| Division/Group Supervisor: | TBD    |           |              |             | Air Attack:    |               | ·           |                    |
| 5. Resources Assign        | ned:   |           |              |             |                |               |             |                    |
| Resource Identifier        |        | ALS LWD   | Le           | ader        | Personnel      | Request #     | Hours       | Reporting Location |
| IHC1 TBD                   |        |           |              |             |                |               |             | ICP                |
| IHC1 TBD                   |        |           |              |             |                |               |             | ICP                |
| IHC1 TBD                   |        |           |              |             |                |               |             | ICP                |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
| 6. Work Assignment         | 's:    |           |              |             |                |               | 1           |                    |
| Construct and improv       |        |           |              |             |                |               |             |                    |
| Construct and improv       | oo.    |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
| 7. Special Instructio      | ns:    |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
|                            |        |           |              |             |                |               |             |                    |
| 0. Communications          |        |           |              |             |                |               |             |                    |
| 8. Communications          |        | F 41      | D. F         | D. T        | T., F.,        | T T           | NA. 4.      | NI-4               |
| Name                       | Ch     | Function  | Rx Freq      | Rx Tone     | Tx Freq        | Tx Tone       | Mode        | Notes              |
| SQF 4                      | 1      | COMMAND   | +            |             | 166.0000       | MPL           |             |                    |
| NIFC T2                    | 3      | TACTICAL  | -            | 0.0         | 168.2000       | 0.0           | A           |                    |
| A/G COMMAND                | 14     | A/G CMD   | 167.8125     |             | 167.8125       | ( <del></del> | _           |                    |
| CALCORD                    | 15     | TACTICAL  | +            | (T6) 156.7  | 156.0750       | (T6) 156.7    | A           |                    |
| AIR GUARD                  | 16     | EMERGENC) |              |             | 168.6250       | T-1, 110.9    |             |                    |
| 9. Prepared by: Nam        | ie:    | N. LaCoun |              |             | RESL           |               |             |                    |
|                            | -      |           |              |             |                | Signature:    |             | <del> </del>       |
| ICS 204                    |        |           | Date/Time:   | 7/15/2025   | 2200           |               | Per         | sonnel Count: 0    |

| 1. Incident Name:          |         |            | 2. Operatio | nal Period: |                |            | 3. Branch   | Division           |
|----------------------------|---------|------------|-------------|-------------|----------------|------------|-------------|--------------------|
|                            | Fay     |            | Date From:  | 07/16/25    | Date To:       | 07/17/25   |             |                    |
|                            |         |            | Time From:  | 0700        | Time To:       | 0700       |             | L                  |
| 4. Operations Pers         | sonnel: |            | •           |             |                |            | Page 1 of 1 | Lima               |
| Operations Section Chief:  |         |            |             |             | Night Ops:     |            |             |                    |
| Branch Director:           |         |            |             |             | Branch Safety: |            |             |                    |
| Division/Group Supervisor: | TBD     |            |             |             | Air Attack:    |            |             |                    |
| 5. Resources Assign        | ned:    |            |             |             |                |            |             |                    |
| Resource Identifier        |         | ALS LWD    | Lea         | ader        | Personnel      | Request #  | Hours       | Reporting Location |
| TF TBD                     |         |            |             |             |                |            |             | ICP                |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            | +           |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
| 6. Work Assignment         |         |            |             |             |                |            |             |                    |
| Construct and improv       | e line. |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
| 7. Special Instructio      | ns:     |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
| 8. Communications          |         | _          |             | 1           | _              | ı          |             | 1                  |
| Name                       | Ch      | Function   | Rx Freq     | Rx Tone     | Tx Freq        | Tx Tone    | Mode        | Notes              |
| SQF 4                      | 1       | COMMAND    | ł           |             | 166.0000       | MPL        |             |                    |
| NIFC T5                    | 4       | TACTICAL   | 166.7750    | 0.0         | 166.7750       | 0.0        | Α           |                    |
| A/G COMMAND                | 14      | A/G CMD    | 167.8125    |             | 167.8125       |            |             |                    |
| CALCORD                    | 15      | TACTICAL   | 156.0750    | (T6) 156.7  | +              | (T6) 156.7 | Α           |                    |
| AIR GUARD                  | 16      | EMERGENCY  | I           |             | 168.6250       | T-1, 110.9 |             |                    |
| 9. Prepared by: Nam        | ie:     | N. LaCount |             |             | RESL           |            |             |                    |
|                            | -       |            |             |             |                | Signature: |             |                    |
| ICS 204                    |         |            | Date/Time:  | 7/15/2025   | 2200           |            | Per         | sonnel Count: 0    |

| 1. Incident Name:          |         |            | 2. Operatio | nal Period: | •              | ,          | 3. Branch   | Division           |
|----------------------------|---------|------------|-------------|-------------|----------------|------------|-------------|--------------------|
|                            | Fay     |            | Date From:  | 07/16/25    | Date To:       | 07/17/25   |             |                    |
|                            |         |            | Time From:  | 0700        | Time To:       | 0700       |             | 0                  |
| 4. Operations Pers         | sonnel: |            |             |             |                |            | Page 1 of 1 | Oscar              |
| Operations Section Chief:  |         |            |             |             | Night Ops:     |            |             |                    |
| Branch Director:           |         |            |             |             | Branch Safety: |            |             |                    |
| Division/Group Supervisor: | TBD     |            |             |             | Air Attack:    |            |             |                    |
| 5. Resources Assign        | ned:    |            |             |             |                |            |             |                    |
| Resource Identifier        |         | ALS LWD    | Lea         | ader        | Personnel      | Request #  | Hours       | Reporting Location |
| IHC1 TBD                   |         |            |             |             |                |            |             | ICP                |
| IHC1 TBD                   |         |            |             |             |                |            |             | ICP                |
| IHC1 TBD                   |         |            |             |             |                |            |             | ICP                |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
| 6. Work Assignment         |         |            |             |             |                |            |             |                    |
| Construct and improv       | e line. |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
| 7. Special Instruction     | ne.     |            |             |             |                |            |             |                    |
| 7. Opeciai mistractio      | 110.    |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
|                            |         |            |             |             |                |            |             |                    |
| 8. Communications          | 1       | 1          |             | 1           | 1              |            |             | T                  |
| Name                       | Ch      | Function   | Rx Freq     | Rx Tone     | Tx Freq        | Tx Tone    | Mode        | Notes              |
| SQF 4                      | 1       | COMMAND    | 170.5500    |             | 166.0000       | MPL        |             |                    |
| NIFC T3                    | 5       | TACTICAL   | 168.6000    | 0.0         | 168.6000       | 0.0        | Α           |                    |
| A/G COMMAND                | 14      | A/G CMD    | 167.8125    |             | 167.8125       |            |             |                    |
| CALCORD                    | 15      | TACTICAL   | 156.0750    | (T6) 156.7  | 156.0750       | (T6) 156.7 | Α           |                    |
| AIR GUARD                  | 16      | EMERGENCY  | 168.6250    |             | 168.6250       | T-1, 110.9 |             |                    |
| 9. Prepared by: Nam        | ie:     | N. LaCount |             |             | RESL           |            |             |                    |
|                            | 1       |            |             |             |                | Signature: |             |                    |
| ICS 204                    |         |            | Date/Time:  | 7/15/2025   | 2200           |            | Per         | sonnel Count: 0    |

| 1. Incident Name:                           |         |            |            | nal Period: | <u> </u>   |                    | 3. Branch   | Division           |
|---|---------|------------|------------|-------------|--|--------------------|-------------|--------------------|
|   | Fay     |            | Date From: |             | Date To:   | 07/17/25           | o. Branon   | Dividion           |
|   | ıay     |            | Time From: |             |  |                    |             | Q                  |
|   |         |            | Time From: | 0700        | Time To:   | 0700               |             | Ouches             |
| 4. Operations Pers                          |         |            |            |             | I Ni Li O  |                    | Page 1 of 1 | Quebec             |
| Operations Section Chief:  Branch Director: |         |            |            |             | Night Ops:<br>Branch Safety:                     |                    |             |                    |
| Division/Group Supervisor:                  |         |            |            |             | Air Attack:                                      |                    |             |                    |
| 5. Resources Assign                         |         |            |            |             | All Attack.                                      |                    |             |                    |
| Resource Identifier                         | neu.    | ALS LWD    | Lo         | ader        | Personnel  | Request #          | Hours       | Poporting Location |
|   |         | ALS LWD    | Le         | auei        | Personner  | Request #          | nours       | Reporting Location |
| CRW TBD                                     |         |            |            |             |  |                    |             | ICP                |
| CRW TBD                                     |         |            |            |             |  |                    |             | ICP                |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
| 6. Work Assignment                          | ts:     | -          | -          |             | •  |                    | •           |                    |
| Construct and improv                        | e line. |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
| 7. Special Instructio                       | ns:     |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
|   |         |            |            |             |  |                    |             |                    |
| 8. Communications                           |         |            |            |             |  |                    |             |                    |
| Name  | Ch      | Function   | Rx Freq    | Rx Tone     | Tx Freq  | Tx Tone            | Mode        | Notes              |
| SQF 4                                       |         |            |            | LY IOUG     | <del></del>                                      | MPL                | ivioue      | inoles             |
|   | 1       | COMMANE    |            | 0.0         | 166.0000   |                    |             |                    |
| NIFC T5                                     | 4       | TACTICAL   | 166.7750   | 0.0         | 166.7750   | 0.0                | A           |                    |
| A/G COMMAND                                 | 14      | A/G CMD    | 167.8125   | (TO) 1==    | 167.8125   | ( <b>T</b> 0) 1=== |             |                    |
| CALCORD                                     | 15      | TACTICAL   | +          | (T6) 156.7  | <del>                                     </del> | (T6) 156.7         | A           |                    |
| AIR GUARD                                   | 16      | EMERGENCY  |            |             | 168.6250   | T-1, 110.9         |             |                    |
| 9. Prepared by: Nam                         | ne:     | N. LaCount |            |             | RESL   |                    |             |                    |
|   | 7       |            |            |             |  | Signature:         |             | <del></del>        |
| ICS 204                                     |         |            | Date/Time: | 7/15/2025   | 2200   |                    | Per         | sonnel Count: 0    |

| 1. Incident Name:          |         |           | 2. Operation              | nal Period: | -              |            | 3. Branch          | Division                 |  |
|----------------------------|---------|-----------|---------------------------|-------------|----------------|------------|--------------------|--------------------------|--|
|                            | Fay     |           | Date From:                | 07/16/25    | Date To:       | 07/17/25   |                    | 7                        |  |
|                            |         |           | Time From:                | 0700        | Time To:       | 0700       |                    | Z                        |  |
| 4. Operations Pers         | sonnel: |           |                           |             |                |            | Page 1 of 1        | Zulu                     |  |
| Operations Section Chief:  |         |           |                           |             | Night Ops:     |            |                    |                          |  |
| Branch Director:           |         |           |                           |             | Branch Safety: |            |                    |                          |  |
| Division/Group Supervisor: | TBD     |           |                           |             | Air Attack:    |            |                    |                          |  |
| 5. Resources Assign        | ned:    |           | 1                         |             | 1              |            |                    |                          |  |
| Resource Identifier        |         | ALS LWD   | Le                        | ader        | Personnel      | Request #  | Hours              | Reporting Location       |  |
| ENG3 ST TBD                |         |           |                           |             |                |            |                    | ICP                      |  |
| ENG3 ST TBD                |         |           |                           |             |                |            |                    | ICP                      |  |
| WTT2 TBD                   |         |           |                           |             |                |            |                    | ICP                      |  |
| WTT2 TBD                   |         |           |                           |             |                |            |                    | ICP                      |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           | 1                         |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
| 6. Work Assignment         | s:      |           |                           |             |                |            |                    |                          |  |
| Construct and improv       | e line. |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
| - 0                        |         |           |                           |             |                |            |                    |                          |  |
| 7. Special Instructio      | ns:     |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
|                            |         |           |                           |             |                |            |                    |                          |  |
| 8. Communications          |         |           |                           |             |                |            |                    |                          |  |
| Name                       | Ch      | Function  | Rx Freq                   | Rx Tone     | Tx Freq        | Tx Tone    | Mode               | Notes                    |  |
| SQF 4                      | 1       | COMMAND   | 170.5500                  |             | 166.0000       | MPL        |                    |                          |  |
| NIFC T1                    | 2       | TACTICAL  | 168.0500                  | 0.0         | 168.0500       | 0.0        | А                  |                          |  |
| A/G COMMAND                | 14      | A/G CMD   | 167.8125                  |             | 167.8125       |            |                    |                          |  |
| CALCORD                    | 15      | TACTICAL  | 156.0750                  | (T6) 156.7  | 156.0750       | (T6) 156.7 | А                  |                          |  |
| AIR GUARD                  | 16      | EMERGENC' | 168.6250                  |             | 168.6250       | T-1, 110.9 |                    |                          |  |
| 9. Prepared by: Nam        | ie:     | N. LaCoun | :                         | •           | RESL           |            | •                  | •                        |  |
|                            |         |           |                           |             |                | Signature: |                    |                          |  |
| ICS 204                    | ]       |           | Date/Time: 7/15/2025 2200 |             |                |            | Personnel Count: 0 |                          |  |
| NIMS IAP                   | 1       |           |                           |             |                | 2017       |                    | TELED INCODMATION//DACIC |  |

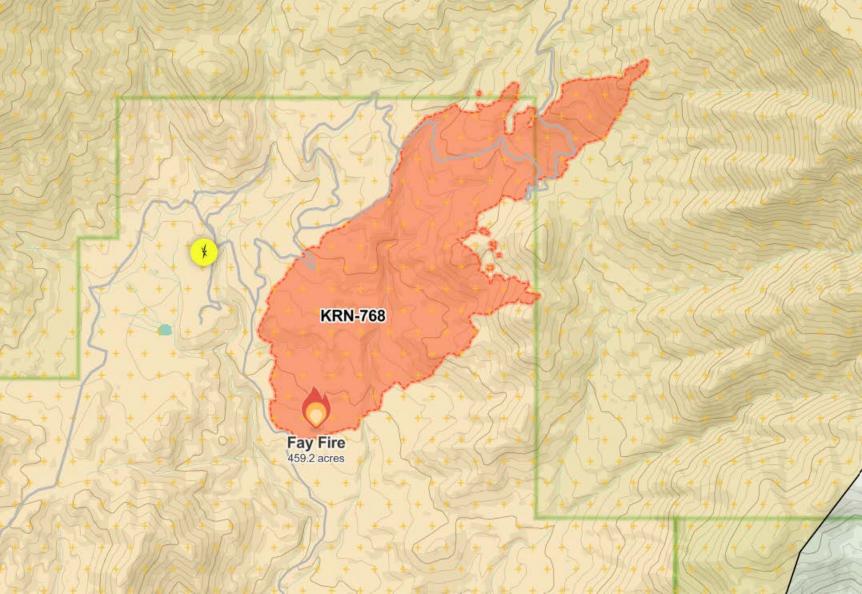
| ICS        | 205 - INCIDENT I   | RADIO COMMUN           | IICATIONS PL     | AN<br>     |              |              |            |      | CONTROLLED UNCLASSIFIED INFORMATION//BASIC |
|------------|--------------------|------------------------|------------------|------------|--------------|--------------|------------|------|--|
| 1. Inc     | ident Name:        |                        | 2. Date/Time Pre | epared     | 3. Operation | onal Period: |            |      |  |
|            | Fay                |                        | Date:            | 07/15/2025 | Date From:   | 07/16/25     | Date To:   |      | 07/17/25                                   |
|            | Incident Cha       | annels                 | Time:            | 1930       | Time From:   | 0700         | Time To:   |      | 0700                                       |
| 4. Co      | mmunications       |                        |                  |            |              |              |            |      |  |
| Ch#        | Function           | Name                   | Assigned To      | Rx Freq    | Rx Tone      | Tx Freq      | Tx Tone    | Mode | Notes                                      |
| 1          | COMMAND            | SQF 4                  | ALL DIVS         | 170.5500   |              | 166.0000     | MPL        |      |  |
| 2          | TACTICAL           | NIFC T1                | A/Z              | 168.0500   | 0.0          | 168.0500     | 0.0        | А    |  |
| 3          | TACTICAL           | NIFC T2                | D                | 168.2000   | 0.0          | 168.2000     | 0.0        | Α    |  |
| 4          | TACTICAL           | NIFC T5                | L/Q              | 166.7750   | 0.0          | 166.7750     | 0.0        | Α    |  |
| 5          | TACTICAL           | NIFC T3                | 0                | 168.6000   | 0.0          | 168.6000     | 0.0        | Α    |  |
| 6          |                    |                        |                  |            |              |              |            |      |  |
| 7          |                    |                        |                  |            |              |              |            |      |  |
| 8          |                    |                        |                  |            |              |              |            |      |  |
| 9          |                    |                        |                  |            |              |              |            |      |  |
| 10         |                    |                        |                  |            |              |              |            |      |  |
| 11         |                    |                        |                  |            |              |              |            |      |  |
| 12         |                    |                        |                  |            |              |              |            |      |  |
| 13         |                    |                        |                  |            |              |              |            |      |  |
| 14         | A/G CMD            | A/G COMMAND            | ALL DIVS         | 167.8125   |              | 167.8125     |            |      |  |
| 15         | TACTICAL           | CALCORD                | ALL DIVS         | 156.0750   | (T6) 156.7   | 156.0750     | (T6) 156.7 | Α    |  |
| 16         | EMERGENCY          | AIR GUARD              | ALL DIVS         | 168.6250   |              | 168.6250     | T-1, 110.9 |      |  |
| 17         |                    |                        |                  |            |              |              |            |      |  |
| 18         |                    |                        |                  |            |              |              |            |      |  |
| 19         |                    |                        |                  |            |              |              |            |      |  |
| 20         |                    |                        |                  |            |              |              |            |      |  |
| 5. Sp      | ecial Instructions |                        | !                | I .        | 1            | l            | 1          |      | 1  |
| This is    | s a test           |                        |                  |            |              |              |            |      |  |
| <br>3. Pre | pared by (Communic | ations Unit Leader): N | Name:            |            |              | Signature:   |            |      |  |
| CS 2       | 05 - CONTROLLED    | UNCLASSIFIED INF       | FORMATION//BA    | SIC        | NIMS IAP     | Date/Time:   | 07/15/2025 |      | 1930                                       |

|              | AIF                    | OPERAT             | IONS SU        | JMMAF        | RY ICS        | S-220           |                |               | repared<br>100 | Dat                     | e Prepare  | d        |                    | Prepared By             |                 |  |
|--------------|------------------------|--------------------|----------------|--------------|---------------|-----------------|----------------|---------------|----------------|-------------------------|------------|----------|--------------------|-------------------------|-----------------|--|
|              | Incident Nan           | ne / Number        |                | Sunrise      | Startup       | Cutoff          | Sunset         | Shut          | down           | Operatio                | nal Period | l - Date | Operational Period |                         | od - Time       |  |
|              | Fay / CA-I             | KRN-032853         |                | 5:59         | 6:29          | 20:03           | 20:33          | 21            | :03            | Wednesday July 16, 2025 |            |          | 0700-2100          |                         |                 |  |
| Gener        | al Remarks,            | Safety Notes,      | Hazards,       | Air Opera    | ations Sp     | ecial Equip     | ment, etc.     | Helibase I    | nformation     | TFR                     | Informati  | on       | Resc               | Rescue Ship Information |                 |  |
| TR           | RACK ALL DIF           | PSITE LOCAT        | IONS / NUN     | MBER OF      | DIPS / (      | GALLONS T       | AKEN.          | Name          |                | Request #               |            |          | Day Hoist          |                         | Night Hoist     |  |
| TRA          | ACK ALL DRO            | P LOCATION         | S / NUMBE      | R OF DF      | ROPS / GA     | ALLONS DF       | ROPPED         | Latitude      |                | Radius: NM              |            | Name     |                    |                         |                 |  |
| All GPS D    | ATA TO BE C            | OLLECTED IN        | N DEGREE       | S, MINUT     | TES, DEC      | IMAL MINU       | TES_FORMAT.    | Longitude     |                | Altitude:               |            | MSL      | Phone              | ,                       |                 |  |
| AVOID        | ) Aerial Annlicati     | on of Retardant /  | ' Foam / Agen  | t within 300 | )' of Wateru  | vavs Bodies o   | f Water etc    |               |                | Centerpoint:            |            | Lat      | Make/Mode          | ı                       |                 |  |
| If Retard    | lant / Foam / Age      | ent is Dropped W   | ithin These Ai | reas Immed   | diately Notif | y the AOBD a    | nd Provide the | Name          |                | Centerpoint.            |            | Long     | Location           | ı                       |                 |  |
| Foli         | lowing Informati       | on: Lat / Long, Es | stimated Numi  | ber of Gallo | ons and a M   | lap Detailing T | he Area.       | Latitude      |                | NOTAMS:                 |            |          | Request            | Procedure for           | These Aircraft: |  |
|              |                        |                    |                |              |               |                 |                | Longitude     |                | Frequency               |            |          | Inc                | cident Commur           | nications       |  |
|              |                        |                    |                |              |               |                 |                |               | 2 if needed)   |                         |            |          |                    | dical Plan For /        |                 |  |
| •            | uencies                | TX                 | Tone           |              | X             | Tone            | AM / FM        | Position      | Na             | ime                     | Ph         | one      | Tra                | ainee                   | Phone           |  |
|              | nmand                  | 166.0000           | MPL            |              | 5500          |                 | FM             | AOBD          |                |                         |            |          |                    |                         |                 |  |
|              | ND - TACTICAL          | 167.8125           |                | 167.         | 8125          |                 | FM             | ASGS          |                |                         |            |          | 1                  |                         |                 |  |
|              | DTARY WING<br>Briefing |                    |                |              |               |                 | AM             | HEBM          |                |                         | -          |          | +                  |                         |                 |  |
|              | ACTICS                 | 151.3100           | (T1) 110.9     | 151.         | 3100          | (T1) 110.9      | FM             |               |                |                         | -          |          | 1                  |                         |                 |  |
|              | ck Briefing            |                    | (11)           |              |               | (1.1) 1.1010    | AM             | HLCO          |                |                         |            |          |                    |                         |                 |  |
| TO           | OLC                    |                    |                |              |               |                 | AM             | AAML          |                |                         |            |          |                    |                         |                 |  |
| DI           | ECK                    |                    |                |              |               |                 | FM             | HLCO          |                |                         |            |          |                    |                         |                 |  |
|              | - MEDICAL              | 156.0750           | 156.7 (6)      |              | 0750          | 156.7 (6)       | FM             | ATGS          |                |                         |            |          |                    |                         |                 |  |
| AIRGUARD - I | Emergency Only         | 168.6250           | 110.9 (1)      | 168.         | 6250          |                 | FM             | 0             |                |                         |            |          |                    |                         |                 |  |
|              |                        |                    |                |              |               |                 | LICOPTERS ( U  |               |                |                         | I I        |          | 1 2                |                         |                 |  |
| FAA #        | Туре                   | Make/Model         | Helibase       | Avail        | Start         | RE              | marks          | FAA#          | Туре           | Make/Model              | Helibase   | Avail    | Start              | Kei                     | marks           |  |
| TBD          |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
| TBD          |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
| TBD          |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
| TBD          |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
| TBD          |                        |                    |                |              |               |                 |                |               |                |                         |            |          | 1                  |                         |                 |  |
| TBD<br>TBD   |                        |                    |                |              |               |                 |                |               |                |                         |            |          | 1                  |                         |                 |  |
| TBD          |                        |                    |                |              |               |                 |                |               |                |                         |            |          | +                  |                         |                 |  |
| טטו          |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
|              |                        |                    |                |              |               |                 |                |               |                |                         |            |          | 1                  |                         |                 |  |
|              |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
|              |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
|              |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
|              | 1                      |                    |                | <u> </u>     |               |                 | XED WING ( Us  | o Dago 2 if N | oodod )        |                         |            |          |                    |                         |                 |  |
| FAA#         | Type                   | Make/Model         | Base           | Avail        | Start         | Remarks         | ALD WING ( US  | FAA#          | Type           | Make/Model              | Base       | Avail    | Start              | Remarks                 |                 |  |
| 1 ^^ #       | Type                   | IVIANE/IVIUUEI     | Dase           | Avaii        | Jiait         | INCHIAINS       |                | 1 44 #        | rype           | inake/iviouei           | Dase       | Avaii    | Jiani              | Nemarks                 |                 |  |
|              |                        |                    |                |              |               |                 |                |               |                |                         |            |          | 1                  |                         |                 |  |
|              |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
|              |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |
|              |                        |                    |                |              |               |                 |                |               |                |                         |            |          |                    |                         |                 |  |

#### **MEDICAL PLAN (ICS 206)**

| 1. Incident Name:   |                    |                  |                       | 2. Operational Period:         |             | Date           | From:    | 7/16/25          | Date To:         | 7/17/25 |
|---|--------------------|------------------|-----------------------|--------------------------------|-------------|----------------|----------|------------------|------------------|---------|
| Fay   |                    |                  |                       |                                | -           | Time           | From:    | 0700             | Time To:         | 0700    |
| 3. Medical Aid Stations:  |                    |                  |                       |                                |             |                |          |                  |                  |         |
| Name  |                    |                  |                       | Location                       |             | Con            | tact Num | ber/Freq         | Paramedics       |         |
|   |                    |                  |                       |                                |             |                |          |                  |                  |         |
|   |                    |                  |                       |                                |             |                |          |                  |                  |         |
| 4. Transportation (indicate a   |                    | <u> </u>         |                       |                                |             |                |          |                  | I                |         |
| Ambulance Servi   | ice                |                  |                       | Location                       |             | Contact Number |          |                  | Level of Service |         |
| Hall Ambulance  |                    | Bakersfield      |                       |                                |             |                |          | 911              | ALS<br>ALS       |         |
| Liberty Air 8   |                    | Ridgecrest       |                       |                                |             | 911            |          |                  | ALS              |         |
| Mercy Air 15 5. Hospitals:  |                    | Bakersfield      |                       |                                |             |                |          | 911              | Ai               |         |
| o. Hospitais.   | Δdd                | ress,            | Contact Number(s)/    | Tra                            | Travel Time |                |          |                  |                  |         |
| Hospital Name   |                    | ng Helipad       | 1 6                   | ontact Number(s)/<br>Frequency | Air         |                |          | Trauma<br>Center | Burn             | 11.1    |
|   |                    | · .              |                       | Trequency                      | All         |                | Ground   |                  | Center           | Helipad |
| Kern Medical  | 1700 Mount Vern    | •                |                       |                                |             | 20             | 60       | Level 2          |                  | · ·     |
| Bakersfield Memorial Kern Valley Hospital   | 420 34th St, Ba    | e. Lake Isabella |                       |                                |             | 5              | 20       |                  |                  |         |
| Verif Valley Hospital 0412 Laurel Ave   |                    | o. Luno Ioabolia | +                     |                                |             | $\dashv$       |          |                  |                  |         |
|   |                    |                  |                       |                                |             |                |          |                  |                  |         |
| 6. Special Medical Emergen  | ⊥<br>cv Procedures | <b></b>          |                       |                                |             |                |          |                  |                  |         |
| 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 |                    |                  | Nature of Injury:     |                                |             |                |          |                  |                  |         |
| 6. Comp/Claims  Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.   |                    |                  |                       |                                |             |                |          |                  |                  |         |
| 7. Prepared by (Medical Unit Leader):   |                    |                  |                       |                                |             |                |          |                  |                  |         |
| 8. Approved by (Safety Officer):  |                    |                  | Signature:            |                                |             |                |          |                  |                  |         |
| ICS 206   |                    |                  | Signature: Date/Time: |                                |             |                |          |                  |                  |         |
| NIMS IAP  |                    |                  |                       | Date/ IIIII                    | U.          |                |          |                  |                  |         |

| SAFETY MESSAGE/PLAN (ICS 208) |                               |                                       |                    |               |               |               |  |  |  |
|-------------------------------|-------------------------------|---------------------------------------|--------------------|---------------|---------------|---------------|--|--|--|
| 1. Incident Nam               | e:                            | 2. Operational Period:                | Date From:         | 7/16/25       | Date To:      | 7/17/25       |  |  |  |
| Fa                            | ay                            |                                       | Time From:         | 0700          | Time To:      | 0700          |  |  |  |
| Ensure radio procedures f     | s are proper<br>or the incide |                                       | /'s IAP and that o | crews are tra | nined in comm | unications    |  |  |  |
| Maintain Situ                 | ational awar                  | eness. Look up, Look do               | own, Look around   | 1             |               |               |  |  |  |
| Be prepared                   | for very hot                  | and humid weather!                    |                    |               |               |               |  |  |  |
| Stay hydrate                  | d!!! Time to                  | think = time to drink. Do             | cument rest and    | hydration o   | n 214.        |               |  |  |  |
| Remain mind                   | lful of what is               | s going on around you!                | LCES!              |               |               |               |  |  |  |
| Be alert to Ra                | attlesnakes i                 | n the area!                           |                    |               |               |               |  |  |  |
| Avoid complete elevated fire  | -                             | operiencing extreme fire<br>g values. | behavior due to    | low live and  | dead fuel mo  | oistures, and |  |  |  |
| ı                             |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
|                               |                               |                                       |                    |               |               |               |  |  |  |
| 4. Site Safety Plan           | Required?                     | □ No                                  |                    |               |               |               |  |  |  |
| -                             | -                             | lan(s) Located At:                    |                    |               |               |               |  |  |  |
| 5. Prepared By:               |                               | Position/Title                        | e: SOFR            | Signature:    |               |               |  |  |  |
| ICS 208                       |                               | Date/Time: 7/15/2                     | 025 / 2030         | orginature    |               |               |  |  |  |



|                                       | UNIT | LC | G (IC  | S 214)           |              |            |          |          |
|---------------------------------------|------|----|--------|------------------|--------------|------------|----------|----------|
| 1. Incident Name:                     |      |    | 2. Ope | rational Period: | Date From:   | 7/16/25    | Date To: | 7/17/25  |
| Fay                                   |      |    |        |                  | Time From:   | 0700       | Time To: | 0700     |
| 3. Unit Name/Designators              |      |    |        | 4. Unit Leader ( | Name and ICS | S Position | )        |          |
| 5. Personnel Assigned/Designators     |      |    |        |                  |              |            |          |          |
| NAME                                  |      |    | ICS    | POSITION         |              | HOME I     | BASE     |          |
|                                       |      |    |        |                  |              | _          |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
| 6. Activity Log (Continue on Reverse) | -    |    |        |                  | ·            |            |          |          |
| TIME                                  |      |    |        | MAJOR E\         | /ENTS        |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
|                                       |      |    |        |                  |              |            |          |          |
| 7. Prepared By:                       |      |    |        | Date/Time:       |              |            |          | NIMS IAP |

| UNIT LOG CONT. (ICS 214) |   |                        |                          |                 |          |                 |  |  |  |  |  |
|--------------------------|---|------------------------|--------------------------|-----------------|----------|-----------------|--|--|--|--|--|
| 1. Incident Name:        |   | 2. Operational Period: | Date From:<br>Time From: | 7/16/25<br>0700 | Date To: | 7/17/25<br>0700 |  |  |  |  |  |
| Fay 6. Activity Log      |   |                        | Tillie Floili.           | 0700            | Time to. | 0700            |  |  |  |  |  |
| TIME                     |   | MAJOR EVENTS           |                          |                 |          |                 |  |  |  |  |  |
| THVE                     |   | WW WOOT L              | VEIVIO                   |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          | + |                        |                          |                 |          |                 |  |  |  |  |  |
|                          | + |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          | + |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
|                          |   |                        |                          |                 |          |                 |  |  |  |  |  |
| 7. Prepared By:          |   | Date/Time:             |                          |                 |          | NIMS IAP        |  |  |  |  |  |