

# INCIDENT ACTION PLAN

# MINERAL INCIDENT

CA-FKU-010219



## OPERATIONAL PERIOD

7/14/2020      0700  
to  
7/15/2020      0700





# INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b>  <p style="text-align: center;"><b>Mineral</b></p>	<b>2. Operational Period:</b>	Date From: 7/14/2020 Time From: 0700	Date To: 7/15/2020 Time To: 0700
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**3. Objective(s):**

- Management Objectives**
- Provide for emergency personnel and public safety at all times.
  - Protect property, improvements, and infrastructure.
  - Ensure repopulation takes place in a quick, efficient, and effective manner.
  - Ensure coordinated, timely and accurate release of public information.
  - Foster and maintain relationships with all cooperators and stakeholders.
  - Protect economic, natural, cultural and heritage resources.
  - Maintain fiscal accountability and keep costs commensurate with values at risk.
- Control Objectives**
- Keep the fire East of Monterey County Line.
  - Keep the fire South of Los Gatos Creek Road.
  - Keep the fire West of Juniper Ridge
  - Keep the fire North of HWY 198

**General Situational Awareness:**

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

**5. Site Safety Plan Required?** Yes  No

**Approved Site Safety Plan(s) Located at:**

**6. Incident Action Plan**

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> ICS 203 | <input checked="" type="checkbox"/> ICS 215A         | <input type="checkbox"/> Phone List       | <input type="checkbox"/> Fire Suppression Repair Plan |
| <input checked="" type="checkbox"/> ICS 204 | <input checked="" type="checkbox"/> ICS 220          | <input type="checkbox"/> Training Message | <input type="checkbox"/>                              |
| <input checked="" type="checkbox"/> ICS 205 | <input checked="" type="checkbox"/> Incident Map     | <input type="checkbox"/> Travel Map       | <input type="checkbox"/>                              |
| <input checked="" type="checkbox"/> ICS 206 | <input checked="" type="checkbox"/> Weather Forecast | <input type="checkbox"/> Demob Plan       | <input type="checkbox"/>                              |
| <input checked="" type="checkbox"/> ICS 208 | <input type="checkbox"/> Fire Behavior               | <input type="checkbox"/> Finance Message  | <input checked="" type="checkbox"/> ICS 214           |

**7. Prepared By:** \_\_\_\_\_ Position/Title: PSC Signature: \_\_\_\_\_

**8. Approved by Incident Commander:** Billy See Signature: \_\_\_\_\_

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> Mineral		<b>2. Operational Period: Date From:</b> 7/14/2020      Date To: 7/15/2020	
		Time From: 0700      Time To: 0700	
<b>3. Incident Commander(s) and Command Staff:</b>		<b>7. Operation Section:</b>	
IC/UC's	Billy See	Operations	Jim MacDougal
Deputy		Deputy Operations	
Safety Officer		Night Ops	
Information Officer		Staging Area	
Liaison Officer		<b>Branch</b>	<b>I</b>
<b>4. Agency/Organization Representatives:</b>		Division/Group	A
Agency/Organization	Name	Division/Group	M
CAL FIRE FKU	Mark Johnson	Division/Group	Z
		Division/Group	
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		<b>Branch</b>	
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		Division/Group	
<b>5. Planning Section:</b>		Division/Group	
Chief		Division/Group	
Deputy		Division/Group	
Resource Unit		Division/Group	
Situation Unit		<b>Branch</b>	
Documentation Unit		Division/Group	
Demobilization Unit		Division/Group	
GISS		Division/Group	
FBAN		Division/Group	
IMET		Division/Group	
Training Tech Spec		<b>Air Operations Branch</b>	
		<b>Director:</b>	
		Air Support Group Supervisor	
		Air Tactical Group Supervisor	
<b>6. Logistics Section</b>		Helibase Manager	
Chief	J.Guerra		
Supply Unit		<b>8. Finance/Administration Section:</b>	
Facilities Unit		Chief	
Ground Support Unit		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
		Cost Unit	
<b>Prepared By: Name:</b>		Position/Title: PSC	Signature: _____
<b>ICS 203</b>		Date/Time: 7/13/2020 2300 hours	NIMS IAP

<b>Weather Forecast</b>	<b>Latitude:</b> <b>37.9871</b>	<b>Longitude:</b> <b>-122.5889</b>	<a href="#">NWS Fire Weather</a>	<a href="#">Update</a>
<b>1. Incident Name:</b> <b>Mineral</b>	<b>2. Operational Period:</b>	Date From: 7/14/20 Time From: 0700	Date To: 7/15/20 Time To: 0700	Last Update 7/13/2020 22:50:12
Forecast:  Spot Forecast for Mineral...CDF-FKU National Weather Service Hanford CA 1050 PM PDT Mon Jul 13 2020  Forecast is based on forecast start time of 2300 PDT on July 13. If conditions become unrepresentative...contact the National Weather Service.  .DISCUSSION...Upper high pressure over the Desert Southwest will shift eastward into Texas during the next couple of days and allow a weak upper level trough to settle southward into California. The trough will bring an increase in onshore flow and minor cooling over the fire through midweek. Temperatures will lower to seasonable levels by Tuesday while minimum humidities trend higher. Little change is expected on Wednesday.  .TUESDAY...  Sky/weather.....Sunny. Max temperature.....89-91. Min humidity.....20-25 percent. Eye level winds....Southwest 4-8 mph in the morning increasing to 6-12 mph by 1100 PDT. Surrounding ridge...West 10-20 mph. Gusts up to 30 mph. Mixing height.....Rising to around 4000 ft AGL. Transport winds.....Southwest 5 mph.  .TUESDAY NIGHT...  Sky/weather.....Clear. Min temperature.....58-60. Max humidity.....55-60 percent. Eye level winds....Southwest 6-12 mph in the evening decreasing to 3-6 mph after 2100 PDT. Surrounding ridge...West 8-16 mph in the evening decreasing to 4-8 mph after 2100 PDT. Mixing height.....Lowering to below 500 ft AGL. Transport winds....West 5 mph.  .WEDNESDAY...  Sky/weather.....Sunny. Max temperature.....89-91. Min humidity.....22-27 percent. Eye level winds....Southwest 3-6 mph. Surrounding ridge...West 4-8 mph Mixing height.....Rising to around 5000 ft AGL. Transport winds....South 3 mph.  \$\$ Forecaster...DS Requested by...Kyle oneil Type of request...WILDFIRE .TAG 2009370.0/HNX .DELDT 07/13/20 .FormatterVersion 1.0.26 .EMAIL koneil1987@gmail.com				
<b>PREPARED BY:</b>	Date/Time:	8/14/16		

## SAFETY MESSAGE/PLAN (ICS 208)

<b>1. Incident Name:</b> Mineral	<b>2. Operational Period:</b>	Date From: 7/14/20 Time From: 0700	Date To: 7/15/20 Time To: 0700
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Steep winding roads are throughout the incident. Slow down when driving on loose gravel and blind curves. Drive defensively with headlights on and use hands free devices.

Working on steep, uneven terrain. Be mindful of rolling materials.

Ensure radios are properly programmed for today's IAP and that crews are trained in communications procedures for the incident.

Maintain situational awareness. Look up, Look down, Look around

Stay hydrated!!! Time to think = time to drink. Document rest and hydration on 214.

Remain mindful of what is going on around you! LCES!

HEADS UP!!! Lookout for SNAGS when working around areas with burned trees. Evaluate all wind damaged trees with large limbs before working under around them.

Avoid complacency!!!! Experiencing extreme fire behavior due to low live and dead fuel moistures, persistent drought, and elevated fire danger rating values.

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<b>5. Prepared By:</b> ICS 208	Position/Title: SOFR Date/Time: 7/13/2020 / 2030	Signature: _____
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# COVID 19 SAFETY MESSAGE



- ✓ **Be alert for symptoms.** Watch for fever (100.4), cough, shortness of breath, or **other symptoms of COVID-19.**
- ✓ If you are feeling ill or have been in contact with someone who has been ill contact your supervisor ASAP.
- ✓ Keep 6' apart to allow for social distancing.
- ✓ If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
- ✓ Avoid touching eyes, nose or mouth with unwashed hands.
- ✓ Follow Merced County recommendations that all persons should wear proper face coverings when necessary.
- ✓ Follow guidance from your local health officials.

Thank you and stay safe!

# ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED  
INFORMATION//BASIC

<b>1. Incident Name:</b> <p style="text-align: center;"><b>Mineral</b></p>	<b>2. Operational Period:</b> Date From: 07/14/20      Date To: 07/15/20 Time From: 0700              Time To: 0700	<b>3. Branch</b> <b>Division</b> <p style="text-align: center;"><b>I</b>                                      <b>A</b></p> <b>Page 1 of 1</b> <b>Alpha</b>
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<b>4. Operations Personnel:</b>			
Operations Section Chief: <b>Jim MacDougal</b>	Night Ops:		
Branch Director:	Branch Safety:		
Division/Group Supervisor:	Air Attack:		

<b>5. Resources Assigned:</b>		<b>** Resources Below in Bold are 12 Hour **</b>						
Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location	
STC MMC 5800C					E-27	0700-0700	<b>Coalinga Fairgrounds</b>	
T/F XFR 5002					E-28	0700-0700	Coalinga Fairgrounds	
STG AEU 9233G					C-8	0700-0700	Coalinga Fairgrounds	
CRW VNC 11					C-7	0700-0700	Coalinga Fairgrounds	
STL VNC 9323L					E-33	0700-0700	Coalinga Fairgrounds	
W/T PVT E-42 TRAHAN					E-42	0700-0700	Coalinga Fairgrounds	
W/T PVT E-43 GRINNELL					E-43	0700-0700	Coalinga Fairgrounds	
W/T PVT E-44 RBI					E-44	0700-0700	Coalinga Fairgrounds	

**6. Work Assignments:**  
Continue indirect line construction improvements  
Prepare indirect control lines for possible firing operations.

**7. Special Instructions:**

<b>8. Communications</b>							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
CDF C2	1	COMMAND	151.2650	103.5	159.3300		Tone 7 or Tone 10
CDF T26	2	TACTICAL	159.2925	192.8 (T16)	159.2925	192.8 (T16)	
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	
AIRGUARD V3	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	

**9. Prepared by: Name:** RESL  
Signature: \_\_\_\_\_  
Date/Time: 7/13/2020 2200                      Personnel Count: 0



# ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED  
INFORMATION//BASIC

<b>1. Incident Name:</b> <p style="text-align: center; font-weight: bold;">Mineral</p>	<b>2. Operational Period:</b> Date From: 07/14/20      Date To: 07/15/20 Time From: 0700            Time To: 0700	<b>3. Branch</b> <b>Division</b> <p style="text-align: center; font-weight: bold;">I                                      M</p> <p style="text-align: center;">Page 1 of 1                      Mike</p>
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<b>4. Operations Personnel:</b>		
Operations Section Chief: <b>Jim MacDougal</b>	Night Ops:	
Branch Director:	Branch Safety:	
Division/Group Supervisor:	Air Attack:	

5. Resources Assigned:	** Resources Below in Bold are 12 Hour **						Hours	Reporting Location
Resource Identifier	ALS	LWD	Leader	Personnel	Request #			
STC VNC 9325C					E-29	0700-0700	Coalinga Fairgrounds	
STC						0700-0700	Coalinga Fairgrounds	
STG BDU 5337G					C-9	0700-0700	Coalinga Fairgrounds	
<b>CRW BEAR DIVIDE IHC</b>					<b>C-6</b>	<b>0700-1900</b>	<b>Coalinga Fairgrounds</b>	
STL MMU 9428L					E-34	0700-0700	Coalinga Fairgrounds	
W/T PVT E-45 WILBER					E-45	0700-0700	Coalinga Fairgrounds	
W/T PVT E-46 FIRELINE TRUCKING					E-46	0700-0700	Coalinga Fairgrounds	
W/T						0700-0700	Coalinga Fairgrounds	

**6. Work Assignments:**  
Continue indirect line construction improvements  
Prepare indirect control lines for possible firing operations.

**7. Special Instructions:**

8. Communications							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
CDF C2	1	COMMAND	151.2650	103.5	159.3300		Tone 7 or Tone 10
CDF T28	4	TACTICAL	151.1825	192.8 (T16)	151.1825	192.8 (T16)	
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	
AIRGUARD V3	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	

<b>9. Prepared by: Name:</b>	RESL
	Signature: _____
<b>ICS 204</b>	Date/Time: 7/13/2020 2200      Personnel Count: 0

# ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED  
INFORMATION//BASIC

<b>1. Incident Name:</b> <b>Mineral</b>	<b>2. Operational Period:</b> Date From: 07/14/20    Date To: 07/15/20 Time From: 0700    Time To: 0700	<b>3. Branch</b> <b>Division</b> <b>I</b> <b>Z</b> <b>Page 1 of 1</b> <b>Zulu</b>
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<b>4. Operations Personnel:</b>		
Operations Section Chief: <b>Jim MacDougal</b>	Night Ops:	
Branch Director:	Branch Safety:	
Division/Group Supervisor:	Air Attack:	

<b>5. Resources Assigned:</b>	<b>** Resources Below in Bold are 12 Hour **</b>							
Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location	
STC BDU 9350C					E-30	<b>0700-0700</b>	<b>Coalinga Fairgrounds</b>	
STC						<b>0700-0700</b>	<b>Coalinga Fairgrounds</b>	
CRW SBC 10					C-4	0700-0700	Coalinga Fairgrounds	
<b>CRW CRANE VALLEY IHC</b>					<b>C-5</b>	<b>0700-1900</b>	<b>Coalinga Fairgrounds</b>	
<b>DOZ STF 51</b>					<b>E-35</b>	<b>0700-1900</b>	<b>Coalinga Fairgrounds</b>	
STL TUU 9416L					E-36	0700-0700	Coalinga Fairgrounds	
W/T PVT E-47 FIRELINE TRUCKING					E-47	0700-0700	Coalinga Fairgrounds	
W/T PVT E-48 GASSAWAY					E-48	0700-0700	Coalinga Fairgrounds	

**6. Work Assignments:**  
Continue indirect line construction improvements  
Prepare indirect control lines for possible firing operations.

**7. Special Instructions:**

<b>8. Communications</b>							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
CDF C2	1	COMMAND	151.2650	103.5	159.3300		Tone 7 or Tone 10
CDF T27	3	TACTICAL	159.3075	192.8 (T16)	159.3075	192.8 (T16)	
CDF T18	14	AIR TO GROUND	159.3450	192.8 (T16)	159.3450	192.8 (T16)	
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	
AIRGUARD V3	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	

**9. Prepared by: Name:** RESL  
Signature: \_\_\_\_\_  
Date/Time: 7/13/2020 2200    Personnel Count: 0

ICS 204  
NIMS IAP

CONTROLLED UNCLASSIFIED INFORMATION//BASIC

**ASSIGNMENT LIST (ICS 204 WF)**

CONTROLLED UNCLASSIFIED INFORMATION//BASIC

<b>1. Incident Name:</b> <b>Mineral</b>	<b>2. Operational Period:</b> Date From: 07/14/20      Date To: 07/15/20 Time From: 0700            Time To: 0700	<b>3. Branch</b> <b>Staging</b>
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<b>4. Operations Personnel:</b>			<b>Page 1 of 1</b>			
Operations Section Chief:	<b>Jim MacDougal</b>	Night Ops:				
Branch Director:		Branch Safety:				
Division/Group Supervisor:		Air Attack:				

<b>5. Resources Assigned:</b>	<b>** Resources Below in Bold are 12 Hour **</b>						
Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location

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

**7. Special Instructions:**

<b>8. Communications</b>							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
CDF C2	1	COMMAND	151.2650	103.5	159.3300		Tone 7 or Tone 10
CALCORD	15	MEDICAL	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7	
AIRGUARD V3	16	AIRGUARD	168.6250N		168.6250N	T1 - 110.9	

**9. Prepared by: Name:** RESL      Signature: \_\_\_\_\_

ICS 204      Date/Time: 7/13/2020 2200      Personnel Count: 0

AIR OPERATIONS SUMMARY ICS-220					Time Prepared 1400	Date Prepared	Prepared By										
Incident Name / Number	Sunrise	Startup	Cutoff	Sunset	Shutdown	Operational Period - Date	Operational Period - Time										
Mineral / CA-FKU-010219	5:00	5:30	19:02	19:32	20:02	Tuesday July 14, 2020	0700-2100										
<b>General Remarks, Safety Notes, Hazards, Air Operations Special Equipment, etc.</b> TRACK ALL DIPSITE LOCATIONS / NUMBER OF DIPS / GALLONS TAKEN. TRACK ALL DROP LOCATIONS / NUMBER OF DROPS / GALLONS DROPPED All GPS DATA TO BE COLLECTED IN DEGREES, MINUTES, DECIMAL MINUTES FORMAT.  <i>AVOID Aerial Application of Retardant / Foam / Agent within 300' of Waterways, Bodies of Water, etc.            If Retardant / Foam / Agent is Dropped Within These Areas Immediately Notify the AOB and Provide the Following Information: Lat / Long, Estimated Number of Gallons and a Map Detailing The Area.</i>					<b>Helibase Information</b> Name Mariposa Latitude 37 30.521' Longitude 120 2.283'		<b>TFR Information</b> Request # A-117 Radius: 3 NM Altitude: 10,000 MSL Centerpoint: 39° 21.34' Lat 122° 51.23' Long NOTAMS: 8/6883 Frequency 124.5750 <a href="http://tfr.faa.gov/tfr2/list.html">http://tfr.faa.gov/tfr2/list.html</a>										
					<b>Rescue Ship Information</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Day Hoist</th> <th style="text-align: center;">Night Hoist</th> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td>Name</td> <td> </td> </tr> <tr> <td>Phone</td> <td> </td> </tr> <tr> <td>Make/Model</td> <td> </td> </tr> <tr> <td>Location</td> <td> </td> </tr> <tr> <td colspan="2"> <b>Request Procedure for These Aircraft:</b>            Incident Communications            See Medical Plan For Additional Info         </td> </tr> </table>		Day Hoist	Night Hoist			Name		Phone		Make/Model		Location
Day Hoist	Night Hoist																
Name																	
Phone																	
Make/Model																	
Location																	
<b>Request Procedure for These Aircraft:</b> Incident Communications See Medical Plan For Additional Info																	
Frequencies	TX	Tone	RX	Tone	AM / FM	Position	Name	Phone	Trainee	Phone							
Command	159.3300		151.2650	103.5000	FM	AOBD											
AIR / GROUND - TACTICAL	159.3450	192.8 (T16)	159.3450	192.8 (T16)	FM	ASGS											
AIR/AIR ROTARY WING	133.0250		133.0250		AM	HEBM											
<b>Helco Briefing</b>																	
AIR TACTICS	168.3375		168.3375		FM												
Air Attack Briefing					AM	HLCO											
TOLC					AM	AAML											
DECK					FM	HLCO											
CALCORD - MEDICAL	156.0750	156.7 (6)	156.0750	156.7 (6)	FM	ATGS											
AIRGUARD - Emergency Only	168.6250	110.9 (1)	168.6250		FM												
HELICOPTERS ( Use page 2 if Needed )																	
FAA #	Type	Make/Model	Helibase	Avail	Start	Remarks	FAA #	Type	Make/Model	Helibase	Avail	Start	Remarks				
FIXED WING ( Use Page 2 if Needed )																	
FAA #	Type	Make/Model	Base	Avail	Start	Remarks	FAA #	Type	Make/Model	Base	Avail	Start	Remarks				

## MEDICAL PLAN (ICS 206)

<b>1. Incident Name:</b>  <p style="text-align: center;"><b>Mineral</b></p>	<b>2. Operational Period:</b> Date From: <u>7/14/20</u> Date To: <u>7/15/20</u> Time From: <u>0700</u> Time To: <u>0700</u>
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3. Medical Aid Stations:			
Name	Location	Contact Number/Freq	Paramedics

4. Transportation (indicate air or ground):			
Ambulance Service	Location	Contact Number	Level of Service
American Ambulance	2911 E Tulare St, Fresno, CA 93721	(559) 443-5900	ALS

5. Hospitals:							
Hospital Name	Address,	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	Helipad
	Lat & Long Helipad		Air	Ground			
Fresno Regional Medical Center	2823 Fresno St. Fresno, CA 93721	(559) 459-6000	00:00	00:00	Level 1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Saint Agnes	1303 E Herndon Ave, Fresno, CA 93720	(559) 450-3000	00:00	00:00	Level 2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

### 6. Special Medical Emergency Procedures

<p><b>Line Emergency</b>                  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.</p> <p><b>Camp Emergency</b>                  Contact Medical Unit with patient complaint/condition and location. Medical staff will respond to stabilize the patient.                  - Medical Unit contacts                  1. Communications                  2. Safety                  3. Logistics                  4. Operations                  5. Crew Supervisor                  6. Comp/Claims</p>	<p><b>Injury Reporting Procedures</b></p> <p>Nature of Injury: _____                  Location of Patient: _____                  Point of Contact: _____                  Transportation Requested by: Air _____ Ground _____                  Point of Pick-Up: _____                  Lat: _____ Long: _____                  Patient Unit ID: _____                  Is an EMT with Patient: Yes _____ No _____                  Age: _____ Sex: Male _____ Female _____</p> <p><b>All Emergencies - Secure the area and identified witnesses for later investigation. Keep accurate log of events.</b></p>
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Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

<b>7. Prepared by (Medical Unit Leader):</b>	Signature: _____
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<b>8. Approved by (Safety Officer):</b>	Signature: _____
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ICS 206	NIMS IAP	Date/Time: _____
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ICS 205 - INCIDENT RADIO COMMUNICATIONS PLAN										CONTROLLED UNCLASSIFIED INFORMATION//BASIC
1. Incident Name:  <b>Mineral</b>		2. Date/Time Prepared Date: 07/13/2020 Time: 1930		3. Operational Period: Date From: 07/14/20      Date To: 07/15/20 Time From: 0700      Time To: 0700						
Incident Channels										
4. Communications										
Ch#	Function	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes		
1	COMMAND	CDF C2	ALL DIVS	151.2650	103.5	159.3300		Tone 7 or Tone 10		
2	TACTICAL	CDF T26	DIV A	159.2925	192.8 (T16)	159.2925	192.8 (T16)			
3	TACTICAL	CDF T27	DIV Z	159.3075	192.8 (T16)	159.3075	192.8 (T16)			
4	TACTICAL	CDF T28	DIV M	151.1825	192.8 (T16)	151.1825	192.8 (T16)			
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6										
7										
8										
9										
10										
11										
12										
13										
14	AIR TO GROUND	CDF T18	ALL DIVS	159.3450	192.8 (T16)	159.3450	192.8 (T16)			
15	MEDICAL	CALCORD	ALL DIVS	156.0750N	T6 - 156.7	156.0750N	T6 - 156.7			
16	AIRGUARD	AIRGUARD V3	ALL DIVS	168.6250N		168.6250N	T1 - 110.9			
17										
18										
19										
20										
5. Special Instructions										
6. Prepared by (Communications Unit Leader): Name: _____										Signature: _____
ICS 205 - CONTROLLED UNCLASSIFIED INFORMATION//BASIC										NIMS IAP
							Date/Time: 07/13/2020	1930		

# FIRING OPERATION CHECKLIST

Location: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Firing Supervisor \_\_\_\_\_

## 1. Personnel Briefing

- Objectives
- Conditions (fire environment)
- Resource assignments identified
  - Firing personnel
  - Holding forces
  - Lookouts
- Ignition plan/sequence
- Communication Plan
- Contingency Plan
- Safety issues

## 2. Go / No-Go

- All personnel briefed
- Weather forecast reviewed
- Resources in place
- Lookouts posted as needed
- Anchor and termination firing points identified
- Communications systems in place
- Fire behavior forecast reviewed
- Escape routes and safety zones established and made known
- Adjoining forces/Air Attack notified

## 3. Approval Prior To Firing

- Division Supervisor
- Branch Director
- Operations

## 4. Other Notifications

- Other: \_\_\_\_\_
- Other: \_\_\_\_\_

Attach Firing Operations Checklist to ICS-214





## UNIT LOG (ICS 214)

<b>1. Incident Name:</b> <p style="text-align: center; margin: 5px 0;">Mineral</p>	<b>2. Operational Period:</b> Date From: <u>7/14/20</u> Date To: <u>7/15/20</u> Time From: <u>0700</u> Time To: <u>0700</u>
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<b>3. Unit Name/Designators</b>	<b>4. Unit Leader (Name and ICS Position)</b>
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5. Personnel Assigned/Designators		
NAME	ICS POSITION	HOME BASE

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

<b>7. Prepared By:</b>	<b>Date/Time:</b>
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