

Peak Fire

Justin ^{Gagnon} ~~Goodman~~ JSSS.
661 289 0042

John Marcos Blum
661 529-6334

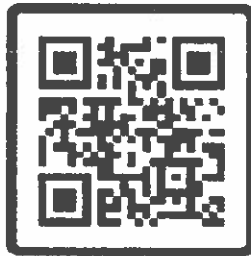
Incident Action Plan

Wednesday, July. 21, 2021

Day Shift

Briefing 0700

CA-CND-002374



Map



Peak Fire

Justin Goodman USFS
661 289 0042

John Marcus Blum
661 529-6334

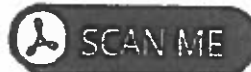
Incident Action Plan

Wednesday, July. 21, 2021

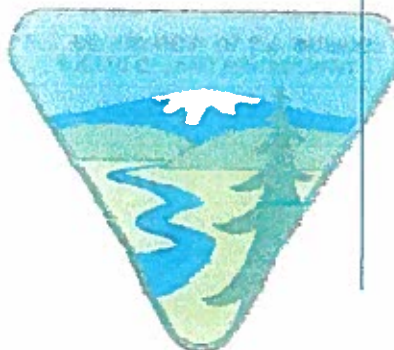
Day Shift

Briefing 0700

CA-CND-002374



Map



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: Peak	2. Operational Period:	Date From: 7/21/2021 Time From: Day	Date To: Time To:															
3. Objective(s): Provide for firefighter and public safety utilizing the full range of fire management strategies and tactics to mitigate risk Protect private property, natural resources, and high values at risk																		
4. Operational Period Command Emphasis: Keep Fire from spreading into lower Thompson Creek Canyon <i>SPR. NO CREEK DRAINAGE DIV (M)</i>																		
General Situational Awareness Be aware of current extreme drought and potential extreme fire behavior																		
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input type="checkbox"/> Approved Site Safety Plan(s) Located at: _____																		
6. Incident Action Plan (the items checked below are included in this Incident Action Plan): <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;"><input checked="" type="checkbox"/> ICS 203</td> <td style="width: 25%;"><input type="checkbox"/> ICS 207</td> <td style="width: 50%;"><u>Other Attachments:</u></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 204</td> <td><input type="checkbox"/> ICS 208</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input type="checkbox"/> ICS 205</td> <td><input checked="" type="checkbox"/> Map/Chart</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205A</td> <td><input checked="" type="checkbox"/> Weather Forecast/Tides/Currents</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input type="checkbox"/> ICS 206</td> <td></td> <td><input type="checkbox"/> _____</td> </tr> </table>				<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	<u>Other Attachments:</u>	<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> _____	<input type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> ICS 205A	<input checked="" type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> _____	<input type="checkbox"/> ICS 206		<input type="checkbox"/> _____
<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	<u>Other Attachments:</u>																
<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> _____																
<input type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	<input type="checkbox"/> _____																
<input checked="" type="checkbox"/> ICS 205A	<input checked="" type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> _____																
<input type="checkbox"/> ICS 206		<input type="checkbox"/> _____																
7. Prepared by: Name: _____		Position/Title: _____ Signature: _____																
8. Approved by Incident Commander: Name: _____		Signature: _____																
ICS 202	IAP Page	Date/Time: _____																

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: Peak Fire		2. Operational Period: Date From: 7/21/2021 Time From: 0700		Date To: 7/21/2021 Time To: Day Shift	
3. Incident Commander(s) and Command Staff:			7. Operations Section:		
IC/UCs	Coughran/Kennison/Medrano/Gagnon	Chief			
		Deputy			
Deputy		Staging Area			
Safety Officer	Matt Dickerson	Branch			
Public Info. Officer		Branch Director			
Liaison Officer		Deputy			
4. Agency/Organization Representatives:			Division/Group	B	TBD
Agency/Organization	Name	Division/Group	Y		TBD
Sequoia NF	Al Watson	Division/Group	M		TBD
CalFire	Cody Bogan	Division/Group			
Kern County Sheriff	J. Lloyd	Division/Group			
		Branch			
		Branch Director			
		Deputy			
5. Planning Section:			Division/Group		
Chief	Steve Anderson	Division/Group			
Deputy		Division/Group			
Resources Unit		Division/Group			
Situation Unit		Division/Group			
Documentation Unit		Branch			
Demobilization Unit		Branch Director			
Technical Specialists		Deputy			
		Division/Group			
		Division/Group			
		Division/Group			
6. Logistics Section:			Division/Group		
Chief		Division/Group			
Deputy		Air Operations Branch			
Support Branch		Air Ops Branch Dir.			
Director					
Supply Unit					
Facilities Unit		8. Finance/Administration Section:			
Ground Support Unit		Chief			
Service Branch		Deputy			
Director		Time Unit			
Communications Unit		Procurement Unit			
Medical Unit		Comp/Claims Unit			
Food Unit		Cost Unit			
9. Prepared by: Name: Steve Anderson		Position/Title: PSC		Signature: _____	
ICS 203	IAP Page	Date/Time: 0820			

PEAK

National Weather Service San Joaquin Valley

2021-07-20 7:14 PM PDT

Spot Forecast for PEAK...USDA

National Weather Service Hanford CA

714 PM PDT Tue Jul 20 2021

Forecast is based on forecast start time of 2000 PDT on July 20.
If conditions become unrepresentative...contact the National Weather Service.

.DISCUSSION...

Temperatures Wednesday and Thursday will be a couple of degrees above normal for this time of year. Seasonal temperatures are expected Friday through the upcoming weekend. Winds will be generally light and terrain-driven. Dry weather is expected through at least Saturday.

.WEDNESDAY...

Sky/weather.....Mostly sunny.
Max temperature.....88-91.
Min humidity.....15-20 percent.
Eye level winds.....Downslope 3-5 mph in the morning, shifting to upslope and increasing to 6-8 mph by 1100 PDT.
Surrounding ridge...West winds 7-9 mph.
Mixing height.....Increasing to around 9100 ft AGL in the afternoon.
Transport winds.....West 8-10 mph.

.WEDNESDAY NIGHT...

Sky/weather.....Mostly clear.
Min temperature.....63-66.
Max humidity.....45-50 percent.
Eye level winds.....Upslope 7-9 mph in the evening, shifting to downslope and decreasing to 2-4 mph by 2000 PDT.
Surrounding ridge...West winds 8-10 mph.
Mixing height.....Lowering to 500 ft AGL or less.
Transport winds.....West 9-11 mph.

\$\$

Forecaster...SOUTH
Requested by...NANCY XIONG
Type of request...WILDFIRE
.TAG 2116117.0/HNX
.DELDT 07/20/21
.FormatterVersion 1.0.26
.EMAIL CACCCC@FIRENET.COM

SAFETY MESSAGE

We are **ALL** Accountable and Responsible for **SAFE** behaviors

INCIDENT: Peak Fire

Date: 2021/07/21

MAJOR HAZARDS

- **STEEP/RUGGED TERRAIN:** Watch footing, maintain Situational Awareness, Wear PPE.
- **FIRE BEHAVIOR POTENTIAL:** Fuel moistures are at critical lows-live and dead loads. Critical fire weather expected.

Fire Order of the Day –Maintain prompt communications with your crew,
Your supervisor and adjoining forces.

- Identify safety zones and escape routes, flag where necessary.
- HYDRATION-HYDRATION-HYDRATION- Drink Early Drink Often. Bring plenty of water with you to the line.
- Post lookouts when working in areas with underslung line.
- Ensure you have been adequately briefed and have established communications with your supervisor and adjacent forces. When in doubt, ask questions.
- Complacency- Just because things are going well now, doesn't mean they can't suddenly go horribly wrong.
- Understand and follow the communications plan including the ICS 206 Medical Emergency Procedures and incident within incident protocols.
- Tailgate Safety Briefings- Discuss Levels of Engagement, consider PACE

Incident Safety Officer:

ASSIGNMENT LIST (ICS 204)

1. Incident Name: Peak Fire		2. Operational Period: Date From: 7/21/2021 Date To: Time From: Day Time To:		3. Branch: Division: B Group: Staging Area:	
4. Operations Personnel:		<u>Name</u>		<u>Contact Number(s)</u>	
Operations Section Chief:				XXX-XXX-XXXX	
Branch Director:				XXX-XXX-XXXX	
Division/Group Supervisor:		TBD <i>Ryan Lobre. Breckenridge</i>		XXX-XXX-XXXX	
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
Resource Identifier	Leader				
STC					Sta 78 0700
STG					Sta 78 0700
<i>Breckenridge C-8</i>					
<i>9314 G</i>					
<i>Kings River</i>					
<i>Scorpions 1</i>					
<i>9460 C</i>					
6. Work Assignments: Secure and improve line above Thompson Canyon <i>60 or 61 Limit .</i>					
7. Special Instructions:					
8. Communications (radio and/or phone contact numbers needed for this assignment):					
Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)			
R5 Tac 4	/	Rx 166.5500 Tx 166.5500			
Air to Grnd	/	Rx 166.6125 Tx 166.6125			
Command SQF 3	/	RX 170.5500 T X 170.5500			
CMD Repeat SQF 4	/	RX 170.5500 TX 166.000 Tone 11 Breckenridge 114.8			
9. Prepared by: Name: Steve Anderson Position/Title: PSC Signature: _____					
ICS 204	IAP Page	Date/Time: Date			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: Peak Fire		2. Operational Period: Date From: 7/21/2021 Date To: Time From: Day Time To:		3. Branch: Division: Y Group: Staging Area: 903 3418	
4. Operations Personnel:		<u>Name</u>	<u>Contact Number(s)</u>		
Operations Section Chief:			XXX XXX-XXXX		
Branch Director:			XXX-XXX XXXX		
Division/Group Supervisor: TBD			XXX XXX-XXXX		
		9346 G	Jeremy Brant	809	903 3418
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
Resource Identifier	Leader				
STC					Sta 78 0700
STG					Sta 78 0700
9346 G					
Little Tujunga					
6. Work Assignments: Secure and improve line From Origin to Piute Mtn Rd					
7. Special Instructions:					
8. Communications (radio and/or phone contact numbers needed for this assignment):					
Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)			
NIFC Tac 2	/	Rx 168.2000 Tx 168.2000			
Air to Grnd	/	Rx 166.6125 Tx 166.6125			
Command SQF 3	/	RX 170.5500 T X 170.5500			
CMD Repeat SQF 4	/	RX 170.5500 TX 166.000 Tone 11 Breckenridge 114.8			
9. Prepared by: Name: Steve Anderson		Position/Title: PSC		Signature: _____	
ICS 204	IAP Page	Date/Time: Date			

ASSIGNMENT LIST (ICS 204)

1. Incident Name: Peak Fire		2. Operational Period: Date From: 7/21/2021 Date To: Time From: Day Time To:		3. Branch: Division: M Group: Staging Area:	
4. Operations Personnel:		<u>Name</u>		<u>Contact Number(s)</u>	
Operations Section Chief:				XXX XXX XXXX	
Branch Director:				XXXXXX-XXXX	
Division/Group Supervisor:		TBD		XXX XXXXXXX	
		Kyle Anderson KV			
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
Resource Identifier	Leader				
Lassen		20			Sta 78 0700
Horseshoe		20			Sta 78 0700
Arroyo Grande		20			
Breckenridge		20			
Kern Valley		20			
Kings River		20			
Seoprions		20			
E-31		5			Clareville
E-45					Clareville
9410 C					
6. Work Assignments: Scout and construct direct line where containment objectives can be met safely 60 ft limit to peak as per - SETTING CRACK DEBRIS					
7. Special Instructions: - 3 Sky Lanes H2O					
8. Communications (radio and/or phone contact numbers needed for this assignment):					
Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)			
NIFC Tac 2	/	Rx 168.2000 Tx 168.2000			
Air to Grnd	/	Rx 166.6125 Tx 166.6125			
Command SQF 3	/	RX 170.5500 T X 170.5500			
CMD Repeat SQF 4	/	RX 170.5500 TX 166.000 Tone 11 Breckenridge 114.8			
9. Prepared by: Name: Steve Anderson		Position/Title: PSC		Signature: _____	
ICS 204	IAP Page	Date/Time: Date			

MEDICAL PLAN (ICS 206 WF)
Controlled Unclassified Information//Basic

POST A COPY IN COMMUNICATIONS TO BE
USED FOR MEDICAL EMERGENCIES
Communication Checklist - Appendix B

Medical Incident Report

FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.

FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.

Use the following items to communicate situation to communications/dispatch.

1. **CONTACT COMMUNICATIONS / DISPATCH** (Verify correct frequency prior to starting report)
Ex: "Communications, Div Alpha Stand-by for Emergency Traffic."
2. **INCIDENT STATUS:** Provide incident summary (including number of patients) and command structure.
Ex: "Communications, I have a Red priority patient, unconscious, struck by a falling tree. Requesting air ambulance to Forest Road 1 at (Lat./Long.) This will be the Trout Meadow Medical. IC is TFLD Jones. EMT Smith is providing medical care."

Severity of Emergency / Transport Priority	<input type="checkbox"/> RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE Ex. Unconscious, difficulty breathing, bleeding severely, 2 nd - 3 rd burns more than 4 palm sizes, heat stroke, disoriented <input type="checkbox"/> YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary. Ex. Significant trauma, unable to walk, 2 nd - 3 rd burns not more than 1-3 palm sizes. <input type="checkbox"/> GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport Ex. Sprains, strains, minor heat-related illness.	
Nature of Injury or Illness & Mechanism of Injury		<i>Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)</i>
Transport Request	GROUND TRANSPORT FROM TRAIL H408 809 H413T MAYDAY 1400 Crew 78 BLE	Air Ambulance / Short Haul/Hoist Ground Ambulance / Other
Patient Location		<i>Descriptive Location & Lat. / Long. (WGS84)</i>
Incident Name		<i>Geographic Name + "Medical" (Ex: Trout Meadow Medical)</i>
On-Scene Incident Commander		<i>Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)</i>
Patient Care		<i>Name of Care Provider (Ex: EMT Smith)</i>

3. INITIAL PATIENT ASSESSMENT: Complete this section for each patient as applicable (start with the most severe patient)

Patient Assessment: See IRPG page 106

Treatment:

4. TRANSPORT PLAN:

Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.) Patient's ETA to Evacuation Location:

Helispot / Extraction Site Size and Hazards:

5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:

Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication

6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable

Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
COMMAND	SQF 4	170.5500	114.8	166.0000	11
AIR-TO-GRND		166.6125	1	166.6125	
TACTICAL					

7. CONTINGENCY: Considerations: If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead.

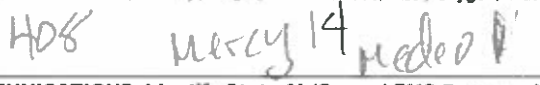
8. ADDITIONAL INFORMATION: Updates/Changes, etc.

REMEMBER: Confirm ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.

MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

Communication Checklist - Appendix B

Medical Incident Report					
FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY. FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.					
Use the following items to communicate situation to communications/dispatch.					
1. CONTACT COMMUNICATIONS / DISPATCH (Verify correct frequency prior to starting report) <i>Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."</i>					
2. INCIDENT STATUS: Provide incident summary (including number of patients) and command structure. <i>Ex: "Communications, I have a Red priority patient, unconscious, struck by a falling tree. Requesting air ambulance to Forest Road 1 at (Lat./Long.) This will be the Trout Meadow Medical. IC is TFLD Jones. EMT Smith is providing medical care."</i>					
Severity of Emergency / Transport Priority	<input type="checkbox"/> RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2^o - 3^o burns more than 4 palm sizes, heat stroke, disoriented.</i> <input type="checkbox"/> YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary. <i>Ex: Significant trauma, unable to walk, 2^o - 3^o burns not more than 1-3 palm sizes.</i> <input type="checkbox"/> GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport <i>Ex: Sprains, strains, minor heat-related illness.</i>				
Nature of Injury or Illness & Mechanism of Injury			<i>Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)</i>		
Transport Request			<i>Air Ambulance / Short Haul/Hoist Ground Ambulance / Other</i>		
Patient Location	<i>Descriptive Location & Lat. / Long. (WGS84)</i>				
Incident Name	<i>Geographic Name + "Medical" (Ex: Trout Meadow Medical)</i>				
On-Scene Incident Commander	<i>Name of on-scene IC of incident within an Incident (Ex: TFLD Jones)</i>				
Patient Care	<i>Name of Care Provider (Ex: EMT Smith)</i>				
3. INITIAL PATIENT ASSESSMENT: Complete this section for each patient as applicable (start with the most severe patient)					
Patient Assessment: See IRPG page 106					
Treatment:					
4. TRANSPORT PLAN:					
Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.) Patient's ETA to Evacuation Location:					
Helispot / Extraction Site Size and Hazards:					
5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:					
<i>Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication</i>					
					
6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable					
Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
COMMAND	SQF 4	170.5500	114.8	166.0000	
AIR-TO-GRND		166.6125	1	166.6125	
TACTICAL					
7. CONTINGENCY: Considerations: If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead.					
8. ADDITIONAL INFORMATION: Updates/Changes, etc.					
REMEMBER: Confirm ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.					

9311C
~~9460C~~ on today
9352C

9414G
Pilot Rock 142

Chenieressa Keruevsky firm