

Incident Action Plan



Barr Fire 2024

Operational Period: 5/16/2024

INCIDENT OBJECTIVES (ICS 202)

| | | | | | | | | | | | | | | | | | |
|---|--|---------------------------------|----------------------------------|----------------------------------|---------------------------|---|----------------------------------|--------------------------------|----------------------------------|------------------------------------|--------------------------------|-----------------------------------|--|--------------------------------|----------------------------------|--|--------------------------------|
| 1. Incident Name: Barr Fire | 2. Operational Period: Date From: 5/16/2024 Date To: 5/16/2024 Time From: 0800 Time To: 1900 | | | | | | | | | | | | | | | | |
| 3. Objective(s): Keep costs commensurate with values at risk. Firefighter and public safety. Utilize UAS to support incident objectives. | | | | | | | | | | | | | | | | | |
| 4. Operational Period Command Emphasis: UAS Modules will deliver all data to GISS Zach Adams via email at region6uas@gmail.com | | | | | | | | | | | | | | | | | |
| General Situational Awareness IT HOT | | | | | | | | | | | | | | | | | |
| 5. Site Safety Plan Required? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Approved Site Safety Plan(s) Located at: ICP | | | | | | | | | | | | | | | | | |
| 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: 33%;"><input type="checkbox"/> ICS 203</td> <td style="width: 33%;"><input type="checkbox"/> ICS 207</td> <td style="width: 34%;">Other Attachments:</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 type="checkbox"/> Map/Chart</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input type="checkbox"/> ICS 205A</td> <td><input 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 type="checkbox"/> ICS 203 | <input type="checkbox"/> ICS 207 | Other Attachments: | <input checked="" type="checkbox"/> ICS 204 | <input type="checkbox"/> ICS 208 | <input type="checkbox"/> _____ | <input type="checkbox"/> ICS 205 | <input type="checkbox"/> Map/Chart | <input type="checkbox"/> _____ | <input type="checkbox"/> ICS 205A | <input type="checkbox"/> Weather Forecast/Tides/Currents | <input type="checkbox"/> _____ | <input type="checkbox"/> ICS 206 | | <input type="checkbox"/> _____ |
| <input type="checkbox"/> ICS 203 | <input type="checkbox"/> ICS 207 | Other Attachments: | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> ICS 204 | <input type="checkbox"/> ICS 208 | <input type="checkbox"/> _____ | | | | | | | | | | | | | | | |
| <input type="checkbox"/> ICS 205 | <input type="checkbox"/> Map/Chart | <input type="checkbox"/> _____ | | | | | | | | | | | | | | | |
| <input type="checkbox"/> ICS 205A | <input type="checkbox"/> Weather Forecast/Tides/Currents | <input type="checkbox"/> _____ | | | | | | | | | | | | | | | |
| <input type="checkbox"/> ICS 206 | | <input type="checkbox"/> _____ | | | | | | | | | | | | | | | |
| 7. Prepared by: Name: <u>Kilgore Trout</u> Position/Title: <u>SITL</u> Signature: <u>JUSTIN BAXTER</u> | | | | | | | | | | | | | | | | | |
| 8. Approved by Incident Commander: Name: <u>Kelly Lewis</u> Signature: _____ | | | | | | | | | | | | | | | | | |
| ICS 202 | IAP Page _____ | Date/Time: <u>5/15/24, 2000</u> | | | | | | | | | | | | | | | |

ORGANIZATION ASSIGNMENT LIST (ICS 203)

| | | | |
|--|------------------|--|--------------------|
| 1. Incident Name: Barr Fire | | 2. Operational Period: Date From: 5/16/2024 Date To: 5/16/2024 Time From: 0800 Time To: 1900 | |
| 3. Incident Commander(s) and Command Staff: | | 7. Operations Section: | |
| IC/UCs | Kelly Lewis | Chief | Mike Manion |
| | | Deputy | |
| Deputy | Ryan Gregg | Staging Area | N/A |
| Safety Officer | Carl Twinley | Branch | |
| Public Info. Officer | P. Inforit | Branch Director | N/A |
| Liaison Officer | L. Iason | Deputy | |
| 4. Agency/Organization Representatives: | | Division/Group | (DIV A) K. Lewis |
| Agency/Organization | Name | Division/Group | (DIV Z) S. Ralston |
| | | Division/Group | (DIV K) Ed Yue |
| | | Division/Group | (DP 40) Blanco |
| NOAA | J. Baxter (IMET) | Division/Group | |
| | | Branch | |
| | | Branch Director | |
| | | Deputy | |
| 5. Planning Section: | | Division/Group | |
| Chief | Nick Foey | Division/Group | |
| Deputy | | Division/Group | |
| Resources Unit | T. Hugger | Division/Group | |
| Situation Unit | K. Trout | 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. | Justin Wood |
| Director | | | |
| Supply Unit | | | |
| Facilities Unit | | 8. Finance/Administration Section: | |
| Ground Support Unit | | Chief | Allen McMillan |
| Service Branch | | Deputy | |
| Director | | Time Unit | |
| Communications Unit | | Procurement Unit | |
| Medical Unit | | Comp/Claims Unit | |
| Food Unit | | Cost Unit | |
| 9. Prepared by: Name: <u>Nick Foey</u> Position/Title: <u>LOGS Chief</u> Signature: _____ | | | |
| ICS 203 | IAP Page _____ | Date/Time: <u>5/15/2024</u> | |

AIR OPERATIONS SUMMARY (ICS 220)

| | | | | | | | | | |
|---|--------------------|--|--|--|--------------|---|--|-----------------------------|--|
| 1. Incident Name: Barr Fire | | 2. Operational Period: Date From: 3/31/2022 Time From: 0800 | | Date To: 5/16/2024 Time To: 1900 | | 3. Sunrise: 0701 | | Sunset: 1733 | |
| 4. Remarks (safety notes, hazards, air operations special equipment, etc.): N/A | | 5. Ready Alert Aircraft: Medivac: 1BH New Incident: 1BH | | 6. Temporary Flight Restriction Number: Altitude: 10500 ft MSL Center Point: 44 17 00N 121 21 00W | | 9. Fixed-Wing (category/kind/type, make/model, N#, base): Air Tactical Group Supervisor Aircraft: | | | |
| | | 8. Frequencies: Air/Air Fixed-Wing 122.900 | | AM FM | | N690JK - (Barr Air Attack) | | | |
| 7. Personnel: | | Phone Number: | | | | | | | |
| Air Operations Branch Director | Name: Justin Wood | 541-420-2890 | Air/Air Rotary-Wing – Flight Following | | | | | | |
| Air Support Group Supervisor | | | Air/Ground | | SIM A/G | | | | |
| Air Tactical Group Supervisor | B. Shebastian | See Above | Command | | | SIM CMD | | Other Fixed-Wing Aircraft: | |
| Helicopter Coordinator | | | Deck Coordinator | | | | | Helibase @ RedmondApt: KRDM | |
| Helibase Manager | Marshall Wallace | 509-670-6365 | Take-Off & Landing Coordinator | | | | | | |
| 10. Helicopters (use additional sheets as necessary): | | | | | | | | | |
| FAA N# | Category/Kind/Type | Make/Model | Base | Available | Start | Remarks | | | |
| N1690JK | ATGS | CJ-525 | RDM | 0900 | 0900 | Fort Meyers ATB | | | |
| 451BH | T3 | B3 Astar | Helibase | 0900 | 0900 | KNAP | | | |
| UR41 | T4 UAS | Anafi USA GOV | ICP | 0900 | As Requested | Barr ICP | | | |
| UR42 | T4 UAS | Anafi USA GOV | ICP | 0900 | As Requested | Barr ICP | | | |
| UR43 | T4 UAS | Anafi USA GOV | ICP | 0900 | As Requested | Barr ICP | | | |
| UR44 | T4 UAS | Anafi USA GOV | ICP | 0900 | As Requested | Barr ICP | | | |
| 11. Prepared by: Name: Justin Wood Position/Title: AOBDD Signature: _____ | | | | | | | | | |
| ICS 220, Page 1 Date/Time: 5/16/24 | | | | | | | | | |

