

Day 7 IAP
11/16/2016
PINNACLE MTN FIRE
Operational Period 0700 - 1900



6. INSTRUCTIONS AND ASSIGNMENTS NOT CLEAR



DNR

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:	2. Operational Period: DAY	
PINNACLEMNTFIRE	Date/Time From: 11/16/2016 0700 WED	Date/Time To: 11/16/2016 1900 WED
3. Objective(s):		
<p>1. Ensure the safety of all firefighters, volunteers, and the public in the suppression and support efforts involved in the Pinnacle Mtn. Fire while minimizing losses and maximizing efforts.</p> <p>2. Contain Pinnacle Mtn. Fire within a box: Big Bottom Rd on the South, the South Saluda River on the North, the firebreak thru High Low Gap to the Table Rock Reservoir on the east.</p> <p>3. Coordinate water drops with the National Guard to cool down hot spots along perimeter firebreaks and to slow the advance of the fire on the east flank.</p> <p>4. Continue to maintain, establish, and reinforce perimeter firebreaks with dozers and hand crews.</p> <p>5. Inform the public with daily updates on the status of the fire conditions to increase their awareness of the suppression efforts.</p>		
4. Operational Period Command Emphasis:		
General Situational Awareness:		
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Approved Site Safety Plan(s) Located at:		
6. Incident Action Plan (the items checked below are included in this Incident Action Plan):		
<input checked="" type="checkbox"/> ICS 202	<input type="checkbox"/> ICS 207	Other Attachments:
<input checked="" type="checkbox"/> ICS 203	<input checked="" type="checkbox"/> ICS 208	<input type="checkbox"/> _____
<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 220	<input type="checkbox"/> _____
<input checked="" 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 checked="" type="checkbox"/> ICS 206		
7. Prepared by: STEVE MOORE Position/Title: PSC		Signature:
8. Approved by Incident Commander:		Signature:
ICS 202	IAP Page	Date/Time:

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: DAY	
PINNACLEMNTFIRE		Date/Time From: 11/16/2016 0700	WED Date/Time To: 11/16/2016 1900 WED
3. Incident Commander(s) and Command Staff:		DIVISION/GROUP	C STUCKEY, PETE
IC/UC	BOZZO, MIKE STATON, MIKE	DIVISION/GROUP	Z MCCASKILL, WINN
DEPUTY		DIVISION/GROUP	STRUCTURE PROTECTION CAUDILL, RICHIE;
SAFETY OFFICER	TERRY, KIP; WEEKS, MICHAEL	DIVISION/GROUP	EMD GROUP WOMACK, PIERCE
INFORMATION OFFICER	HUBRIGHT, RUSSELL	DIVISION/GROUP	SECURITY GROUP HASHE, CREED
LIAISON OFFICER		7b. Air Operations Branch:	
4. Agency/Organization Representative(s):		AIR OPS BRANCH DIRECTOR	
Agency/Organization	Name	AIR ATTACK SUPERVISOR	
FIRE DEPARTMENT MUTAL AID	KING, CHARLIE	AIR SUPPORT SUPERVISOR	
PICKENS COUNTY EMD	WOMACK, H. PIERCE	HELICOPTER COORDINATOR	
5. Planning Section:		AIR TANKER COORDINATOR	
CHIEF	MOORE, STEVE	AIR ATTACK SUPERVISOR	ANDERSON, SAM
DEPUTY		8. Finance/Administration Section:	
RESOURCES UNIT	BLOUNT, HARRY; DAVIS, BRIAN BECKHAM, CHISOLM	CHIEF	NORDEEN, CATHY
SITUATION UNIT	PHILLIPS, SCOTT	DEPUTY	
DOCUMENTATION UNIT		TIME UNIT	
DEMOBILIZATION UNIT		PROCUREMENT UNIT	
GIS SPECIALIST	DOUGLAS, JAMES	COMPENSATION UNIT	
TECHNOLOGY SUPPORT SPECIALIST		COST UNIT	
SCKN	JENKINS, DAVID CARROLL, DRAKE		
6. Logistics Section:			
CHIEF	OWEN, DAVID		
DEPUTY			
SUPPLY UNIT			
FACILITIES UNIT	JONES, JAIME		
GROUND SUPPORT UNIT	BLESSING, PAUL		
COMMUNICATIONS UNIT			
FOOD UNIT	JONES, JAIME		
7. Operations Section:			
PLANNING OPS	JONES, DARRYL		
OPS SECTION CHIEF	BRUCKE, JARROD		
DEPUTY OPS SECTION CHIEF			
STAGING AREA			
DIVISION/GROUP	A HOLT, RON		
DIVISION/GROUP	B POOLE, HENRY		
9. Prepared By: Name: HARRY BLOUNT		Position/Title: RESL	Signature:
ICS 203	IAP Page	Date/Time: 11/15/2016 1337	

Division/Group Assignment List (ICS 204 WF)

1. Incident Name:			3.			
PINNACLEMNTFIRE			Branch:		Division/Group: A	
2. Operational Period: DAY						
Date/Time From: 11/16/2016 0700 WED		Date/Time To: 11/16/2016 1900 WED				
4. Operations Personnel						
OPERATIONS CHIEF		BRUCKE, JARROD		BRANCH DIRECTOR		
DIVISION/GROUP SUPERVISOR		HOLT, RON		AIR ATTACK SUPERVISOR		ANDERSON, SAM
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
DOZER BOSS			MCGILL, MICHAEL	1	ICP/0700	ICP/1900
SCFC DOZER			ULMER, SCOTT	1	ICP/0700	ICP/1900
SCFC DOZER			WILSON, JOHN	1	ICP /0700	ICP/1900
HAND CREW			WEST, ERIC	10	ICP/0700	ICP/1900
6. Control Operations/Work Assignments:						
Continue to monitor the back burn toward the river. Control and mop up near the line. Chainsaw any snags.						
7. Special Instructions:						
Contact Catfish 1-1 for Bucket Drops.						
Always know your Safety Zone location.						
Watch for falling rocks Be careful of slipping Use LCES						
Hand Crew: Tisdale, Jordan, McNeil, Johnson, Lowder, Wallace, Barton, Brunson and Benton						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A
AIR TO GROUND	SC TAC 6	151.48250 N	203.5 HZ	151.48250 N	203.5 HZ	A
TACTICAL DIV A	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A
TACTICAL DIV B/Z	SC TAC 2	151.2275 N	203.5 HZ	151.22750 N	203.5 HZ	A
TACTICAL DIV C	SC TAC 2	151.22750 N	203.5 HZ	151.22750	203.5 HZ	A
STRUCTURE PROTECTION	VTAC 37	154.4525 N	136.5 HZ	158.5375	136.5 HZ	A
STRUCTURE PROTECTION	VTAC 36	151.1375 N	136.5 HZ	159.4725 N	136.5 HZ	A
REPEATER	INCIDENT	159.4050 N	365 DPL	151.23500	365 DPL	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
HARRY BLOUNT			STEVE MOORE		11/15/2016	1337

Division/Group Assignment List (ICS 204 WF)

1. Incident Name:			3.				
PINNACLEMNTFIRE			Branch:		Division/Group: B		
2. Operational Period: DAY							
Date/Time From: 11/16/2016 0700 WED		Date/Time To: 11/16/2016 1900 WED					
4. Operations Personnel							
OPERATIONS CHIEF		BRUCKE, JARROD		BRANCH DIRECTOR			
DIVISION/GROUP SUPERVISOR		POOLE, HENRY		AIR ATTACK SUPERVISOR		ANDERSON, SAM	
5. Resources Assigned this Period							
Strike Team / Task Force / Resource Designator		LWD	Leader		Number Persons	Drop Off PT./Time	Pick Up PT./Time
HAND CREW		11/18	RAINBOLT, TIM		5	ICP/0700	ICP/1900
DOZER (WATERSHED)			JENKINS, HELBURG		2		
6. Control Operations/Work Assignments:							
Monitor back-burn toward river.							
Chainsaw any snags.							
Mop-up where needed.							
7. Special Instructions:							
Contact Catfish 1-1 for Bucket Drops							
Always know your Safety Zone location.							
Watch out for falling rocks							
Watch your footing							
Use LCES							
Watch out for hemlock snags.							
8. Division/Group Communication Summary							
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode	
COMMAND	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A	
AIR TO GROUND	SC TAC 6	151.48250 N	203.5 HZ	151.48250 N	203.5 HZ	A	
TACTICAL DIV A	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A	
TACTICAL DIV B/Z	SC TAC 2	151.2275 N	203.5 HZ	151.22750 N	203.5 HZ	A	
TACTICAL DIV C	SC TAC 2	151.22750 N	203.5 HZ	151.22750 N	203.5 HZ	A	
STRUCTURE PROTECTION	VTAC 37	154.4525 N	136.5 HZ	158.5375	136.5 HZ	A	
STRUCTURE PROTECTION	VTAC 36	151.1375 N	136.5 HZ	159.4725 N	136.5 HZ	A	
REPEATER	GLASSY MTN	159.4050 N	365 DPL	151.23500	365 DPL	A	
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time	
CHISOLM BECKHAM			STEVE MOORE		11/15/2016	1337	

Division/Group Assignment List (ICS 204 WF)

1. Incident Name:			3.			
PINNACLEMNTFIRE			Branch:		Division/Group:	
2. Operational Period: DAY					C	
Date/Time From: 11/16/2016 0700 WED		Date/Time To: 11/16/2016 1900 WED				
4. Operations Personnel						
OPERATIONS CHIEF		BRUCKE, JARROD		BRANCH DIRECTOR		
DIVISION/GROUP SUPERVISOR		STUCKEY, PETE		AIR ATTACK SUPERVISOR		ANDERSON, SAM
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
DOZER BOSS			PRITCHARD, ANNETA	1	ICP/0700	ICP/1900
SCFC DOZER			CAINES, WILLIAM	1	ICP/0700	ICP/1900
SCFC DOZER			CONNELLY, SAM	1	ICP/0700	ICP/1900
HAND CREW			PATTERSON, STEPHEN	7	ICP/0700	ICP/1900
SCFC DOZER			HUDSON, JOEY	1	ICP/0700	ICP/1700
SCFC DOZER			LYLES, RANDALL	1	ICP/0700	ICP/1900
SCFC DOZER			BAGWELL, DAVID	1	ICP/0700	ICP/1900
FIELD OBSERVER/BURN BOSS			COX, TREY	1	ICP/0700	ICP/1900
6. Control Operations/Work Assignments:						
Monitor and Evaluate fire line for burnout. Chainsaw any snags near the line.						
7. Special Instructions:						
Contact Catfish 1-1 for Bucket Drops Always know your Safety Zone location. Watch out for falling rocks Watch your footing Use LCES Hand Crew: Hutto, Quinn, Spaulding, Smith, Counts, and Jackson						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A
AIR TO GROUND	SC TAC 6	151.48250 N	203.5 HZ	151.48250 N	203.5 HZ	A
TACTICAL DIV A	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A
TACTICAL DIV B/Z	SC TAC 2	151.2275 N	203.5 HZ	151.22750 N	203.5 HZ	A
TACTICAL DIV C	SC TAC 2	151.22750 N	203.5 HZ	151.22750 N	203.5 HZ	A
STRUCTURE PROTECTION	VTAC 37	154.4525 N	136.5 HZ	158.5375 N	136.5 HZ	A
STRUCTURE PROTECTION	VTAC 36	151.1375 N	136.5 HZ	159.4725 N	136.5 HZ	A
REPEATER	GLASSY MTN	159.4050 N	365 DPL	151.23500 N	365 DPL	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
CHISOLM BECKHAM			STEVE MOORE		11/15/2016	1337

Division/Group Assignment List (ICS 204 WF)

1. Incident Name:			3.			
PINNACLEMNTFIRE			Branch:		Division/Group: Z	
2. Operational Period: DAY						
Date/Time From: 11/16/2016 0700 WED		Date/Time To: 11/16/2016 1900 WED				
4. Operations Personnel						
OPERATIONS CHIEF		BRUCKE, JARROD		BRANCH DIRECTOR		
DIVISION/GROUP SUPERVISOR		MCCASKILL, WINN		AIR ATTACK SUPERVISOR		ANDERSON, SAM
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
DOZER BOSS			MCCASKILL, WINN	1	ICP/0700	ICP/1900
SCFC DOZER			RIBELIN, RUSTY	1	ICP/0700	ICP/1900
HAND CREW		11/18	KENDALL, BEN	9	ICP/0700	ICP/1900
6. Control Operations/Work Assignments:						
Control line and mop up where needed.						
7. Special Instructions:						
Contact Catfish 1-1 for Bucket Drops						
Always know your Safety Zone location.						
Watch out for falling rocks Watch your footing Watch out for snags Use LCES						
Hand Crew: Jackson, Browning, Berry, Harrington, Parnell, Whetstone, R. Jones, and Hale						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A
AIR TO GROUND	SC TAC 6	151.48250 N	203.5 HZ	151.48250 N	203.5 HZ	A
TACTICAL DIV A	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A
TACTICAL DIV B/Z	SC TAC 2	151.2275 N	203.5 HZ	151.22750 N	203.5 HZ	A
TACTICAL DIV C	SC TAC 2	151.22750 N	203.5 HZ	151.22750	203.5 HZ	A
STRUCTURE PROTECTION	VTAC 37	154.4525 N	136.5 HZ	158.5375	136.5 HZ	A
STRUCTURE PROTECTION	VTAC 36	151.1375 N	136.5 HZ	159.4725 N	136.5 HZ	A
REPEATER	GLASSY MTN	159.4050 N	365 DPL	151.23500	365 DPL	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
CHISOLM BECKHAM			STEVE MOORE		11/15/2016	1337

Division/Group Assignment List (ICS 204 WF)

1. Incident Name:			3.			
PINNACLEMNTFIRE			Branch:		Division/Group: STRUCTURE PROTECTION	
2. Operational Period: DAY						
Date/Time From: 11/16/2016 0700 WED		Date/Time To: 11/16/2016 1900 WED				
4. Operations Personnel						
OPERATIONS CHIEF		BRUCKE, JERROD		BRANCH DIRECTOR		
DIVISION/GROUP SUPERVISOR		CAUDILL, RICHIE;		AIR ATTACK SUPERVISOR		ANDERSON, SAM
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
TASK FORCE 1 (2 ENGINE, 2 BRUSH & 1 TANKER))			TBD	8	ICP/0700	ICP/1900
TASK FORCE 2 (2 ENGINE, 2 BRUSH & 1 TANKER)			TBD	8	ICP/0700	ICP/1900
TASK FORCE 3 (2 ENGINE, 2 BRUSH & 1 TANKER)			TBD	8	ICP/0700	ICP/1900
TASK FORCE 4 (2 ENGINES, 2 BRUSH)			TBD	7	ICP/0700	ICP /1900
TASK FORCE 5 (2 ENGINES & 2 BRUSH)			TBD	7	ICP/0700	ICP/1900
1 ENGINE			TBD	4	ICP/0700	ICP/1900
6. Control Operations/Work Assignments:						
Conduct community awareness around/within the River Bluff Community.						
Split assignments for task forces in 4 equal areas.						
All Homes will be evaluated and any Prep That Can Be Done Will Be (Leaf Blowing, Raking, etc.)						
7. Special Instructions:						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A
AIR TO GROUND	SC TAC 6	151.48250 N	203.5 HZ	151.48250 N	203.5 HZ	A
TACTICAL DIV A	SC TAC 5	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A
TACTICAL DIV B/Z	SC TAC 2	151.2275 N	203.5 HZ	151.22750 N	203.5 HZ	A
TACTICAL DIV C	SC TAC 2	151.22750 N	203.5 HZ	151.22750	203.5 HZ	A
STRUCTURE PROTECTION	VTAC 37	154.4525 N	136.5 HZ	158.5375	136.5 HZ	A
STRUCTURE PROTECTION	VTAC 36	151.1375 N	136.5 HZ	159.4725 N	136.5 HZ	A
REPEATER	GLASSY MTN	159.4050 N	365 DPL	151.23500	365 DPL	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
CHISOLM BECKHAM			STEVE MOORE		11/15/2016	1337

Division/Group Assignment List (ICS 204 WF)

1. Incident Name:			3.			
PINNACLEMNTFIRE			Branch:		Division/Group: EMD GROUP	
2. Operational Period: DAY						
Date/Time From: 11/16/2016 0700 WED		Date/Time To: 11/16/2016 1900 WED				
4. Operations Personnel						
OPERATIONS CHIEF		BRUCKE, JARROD		BRANCH DIRECTOR		
DIVISION/GROUP SUPERVISOR		WOMACK, PIERCE		AIR ATTACK SUPERVISOR		
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
PC MAINTENANCE			WEBSTER, TOMMY	3	ICP/0700	ICP/1900
RESCUE			NEELY, JONATHAN	4	ICP/0700	ICP/1900
EMS			CHILDRESS, DAVID	2	ICP/0700	ICP/1900
CERT			HINES, GEORGE	4	ICP/0700	ICP/1900
RED CROSS			LIGON, JOHN	4	ICP/0700	ICP/1900
6. Control Operations/Work Assignments:						
<u>Pickens County Maintenance</u> Provide ground support.						
<u>Rescue</u> Provide for evacuations as needed. Provide support in moving equipment.						
<u>EMS</u> Provide assistance for medical emergencies.						
<u>CERT</u> Provide assistance with donations at the Fire Department.						
<u>Red Cross</u> Provide food, water and shelter.						
7. Special Instructions:						
Contact Numbers:						
• Womack, Pierce: 864-442-3112						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
LOGISTICS	VTAC 11					
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
HARRY BLOUNT						

Division/Group Assignment List (ICS 204 WF)

1. Incident Name:			3.				
PINNACLEMNTFIRE			Branch:		Division/Group: SECURITY GROUP		
2. Operational Period: DAY							
Date/Time From: 11/16/2016 0700 WED		Date/Time To: 11/16/2016 1900 WED					
4. Operations Personnel							
OPERATIONS CHIEF		STATON, MIKE		BRANCH DIRECTOR			
DIVISION/GROUP SUPERVISOR		HASHE, CREED		AIR ATTACK SUPERVISOR			
5. Resources Assigned this Period							
Strike Team / Task Force / Resource Designator		LWD	Leader		Number Persons	Drop Off PT./Time	Pick Up PT./Time
SITE SECURITY			PARSON, GARY		5	ICP/0700	ICP/1900
6. Control Operations/Work Assignments:							
Provide site security Assist with road closures and evacuations if needed. Monitor Highway 11 for traffic control.							
7. Special Instructions:							
Protect vacated properties.							
Contact Numbers:							
<ul style="list-style-type: none"> • Parsons, Gary: 864-303-2244 • Hashe, Creed: 864-209-7975 							
8. Division/Group Communication Summary							
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode	
COMMAND							
TACTICAL							
LOGISTICS							
AIR TO GROUND							
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time	
HARRY BLOUNT							

SAFETY MESSAGE

Incident:

Pinnacle Mountain Fire

Date: **November 16, 2016**

Time: **07:00 – 19:00**

Major Hazard and Risks:

- Snags
- Hydration
- Footing
- Dozer, ATV, and Air Ops
- WUI
- Public/Traffic
- Communications
- Complacency
- New Personnel on Fire Line

Narrative:

- ID and make others aware of snags. Fall snags that are near the fireline when possible.
- Stay Hydrated. Even in cool weather dehydration can sneak up on you.
- Watch footing and take your time.
- Keep good situational awareness.
- Watch for powerlines and propane tanks near houses
- Obey speed limits, watch out for motorist and drive with your headlights on.
- Maintain constant communication
- Don't let complacency creep in.
- Dozer operators be sure wear seat belts
- Also each of us is a field safety officer. Keep an eye on others and watch for signs of any problems.

Kip W. Terry
Safety Officer



SAFETY ZONES 1 (LCES)

Operational Engagement Category

A safety zone is a location where the threatened firefighter can find adequate refuge from an approaching fire.

- What is the difference between a safety zone and a deployment site?
 - The safety zone is the area where a firefighter can survive without using a fire shelter. The deployment site is used when fire conditions are such that escape routes and safety zones have been compromised.

- How do you identify a good safety zone?
 - Consider the distance from the escaped fire as well as topography, winds, fire behavior, and fuels in the area.
 - The best locations are usually “in the black;” those with a minimum of, or devoid of, ground/aerial vegetation; or large bodies of water.
 - Location is scouted and marked well for visibility at all times.
 - Location has been reassessed in relation to line work progress, fatigue, changes in fire behavior, and arrival of additional resources.
 - For radiant heat only, the distance separation between the firefighter and the flames must be at least four times the maximum flame height. This distance must be maintained on all sides, if the fire has ability to burn completely around the safety zone. Convective heat from wind and/or terrain influences will increase this distance requirement.
 - Take advantage of heat barriers such as lee side of ridges, large rocks, or solid structures.

- What should you avoid in selecting a safety zone?
 - Avoid locations that are downwind from the fire.
 - Avoid locations that are in chimneys, saddles, or narrow canyons.
 - Avoid locations that require a steep uphill escape route.

References:
Incident Response Pocket Guide
Interagency Standards for Fire and Fire Aviation Operations
[“LCES and Other Thoughts” by Paul Gleason](#)

Have an idea? Have feedback? Share it.

EMAIL | [Facebook](#) | MAIL: 6 Minutes for Safety Subcommittee • 3833 S. Development Ave • Boise, ID 83705 | FAX: 208-387-5250

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

1. Incident Name:	2. Date/Time Prepared:	3. Operational Period: DAY	
PINNACLE MNT FIRE	Date: 11/15/2016 Time: 1600	Date/Time From: 11/16/2016 0700 WED	Date/Time To: 11/16/2016 1900 WED

4. Basic Radio Channel Use:

Zone Group	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq	RX Tone/NAC	TX Freq	TX Tone/NAC	Mode (A,D, or M)	Remarks
SC TAC 5		COMMAND	SC TAC 5	COMMAND	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A	SCFC TAC 5
SC TAC 6		AIR TO GROUND	SC TAC 6	AIR OPS	151.48250 N	203.5 HZ	151.48250 N	203.5 HZ	A	SCFC TAC 6
SC TAC 5		TACTICAL DIV A	SC TAC 5	DIV A	151.28000 N	203.5 HZ	151.28000 N	203.5 HZ	A	SCFC TAC 5
SC TAC 2		TACTICAL DIV B/Z	SC TAC 2	DIV B/Z	151.2275 N	203.5 HZ	151.22750 N	203.5 HZ	A	SCFC TAC 2
SC TAC 2		TACTICAL DIV C	SC TAC 2	DVS C	151.22750 N	203.5 HZ	151.22750	203.5 HZ	A	SCFC TAC 2
VTAC 37		STRUCTURE	VTAC 37	STRUCTURE	154.4525 N	136.5 HZ	158.5375	136.5 HZ	A	DIV A/B
VTAC 36		STRUCTURE	VTAC 36	STRUCTURE	151.1375 N	136.5 HZ	159.4725 N	136.5 HZ	A	DIV C/Z
GLASSY MTN		REPEATER	GLASSY MTN	COMMAND	159.4050 N	365 DPL	151.23500	365 DPL	A	
INCIDENT		REPEATER	INCIDENT		159.3075 N	023 DPL	151.1825 N	023 DPL	A	
FF MOB		LOGISTICS	SC MUTUAL AID 4	FF MOB	PAL 800		PAL 800	NA	A	FIGHTER MOBILIZATION

5. Special Instructions:

6. Prepared By (Communications Unit Leader)	Name: MITCHELL, LLOYD	Signature:
ICS 205	IAP Page	Date/Time: 11/15/2016 1600

ICS-205A

IC/UC	BOZZO, MIKE STATON, MIKE	803 667 1061 864 380 3579
SAFETY OFFICER	TERRY, KIP WEEKS, MICHAEL	803 508-9106 864 910-0052
FIRE DEPT.	KING, CHARLIE	864 784 5268
PICKENS CO EMD	WOMACK, PIERCE	864 442 3112
PLANNING SECTION CHIEF	MOORE, STEVE	803 360 6956
RESOURCES UNITE	BLOUNT, HARRY CARROL, DRAKE BECKHAM, CHISOLM	803 397 2914 803 601-9121 803 667 0806
SITUATION UNIT	PHILLIPS, SCOTT	803 667 1067
GIS SPECIALIST	DOUGLAS, JAMES	803 968 4817
SCKN	JENKINS, DAVID CARROLL, DRAKE	803 667 1002 803 601-9121
LOGISTICS SECTION CHIEF	OWEN, DAVID	864 637 8519
FACILITIES UNIT	JONES, JAIME	864 933-4165
GROUND SUPPORT	BLESSING, PAUL	864 395 8082
FOOD UNIT	JONES, JAIME	864 933-4165
PLANNING OPS	JONES, DARRYL	803 667 1039
OPS SECTION CHIEF	BRUCKE, JARRROD	864 557 0065
DIVISION A	HOLT, RON	843 992 6417
DIVISION B	POOLE, HENRY	864 434 1703
DIVISION C	STUCKEY, PETE	803 942 1526

ICS-205A

DIVISION Z	MCCASKILL, WINN	843 616 7429
STRUCTURE PROTECTION	CAUDILL, RICHIE	864 710 6875
	STATON, MIKE	864 380 3579
EMD GROUP	WOMACK, PIERCE	864 442 3112
SECURITY GROUP	HASHE, CREED	864 209 7975
AIR ATTACK SUPERVISOR	ANDERSON, SAM	843 992-2190
FINANCE	NORDEEN, CATHY	803 360-2644

Medical Plan (ICS 206 WF)

1. Incident/Project Name:		2. Operational Period:		DAY			
PINNACLEMNTFIRE		Date/Time From: 11/16/2016 0700 WED		Date/Time To: 11/16/2016 1900 WED			
3. Ambulance Services							
Name	Complete Address	Phone & EMS Frequency	Advanced Life Support (ALS) Yes No				
PICKENS CO EMS	216 LEC PICKENS, SC 29671	(864) 868-2373	X				
4. Air Ambulance Services							
Name	Phone	Type of Aircraft	Capability				
5. Hospitals							
Name Complete Address	GPS Datum - WGS 84 Coordinate Standard Degrees Decimal Minutes DD° MM.MMM' N - Lat DD° MM.MMM' W - Long	Travel Time		Phone	Helipad		Level of Care Facility
		Air	Ground		Yes	No	
ANMED HEALTH CANNON 123 W. G. ACKER DR. PICKENS , SC 29671	Lat:	15 MIN	(864) 878-4791		X		
	Long:						
	VHF:						
GREENVILLE HOSPITAL 701 GROVE RD GREENVILLE, SC 29605	Lat:	45 MIN	(864) 455-7000	X		LEVEL 1 TRAUMA CENTER	
	Long:						
	VHF:						
6. Area Location Capability							
Branch Division/Group							
	EMS Responders & Capability:						
	Equipment Available on Scene:						
	Medical Emergency Channel:						
	ETA for Ambulance to Scene:						
	Air:						
	Ground:						
	Approved Helispot:						
	Lat:						
Long:							
7. Remote Camp Location(s)							
8. Prepared By (Medical Unit Leader)		9. Date/Time		10. Reviewed By (Safety Officer)		11. Date/Time	
DAVID OWEN		11/15/2016 1337					

Medical Plan (ICS 206 WF)

1. Incident/Project Name:		2. Operational Period: DAY	
PINNACLEMNTFIRE		Date/Time From: 11/16/2016 0700 WED	Date/Time To: 11/16/2016 1900 WED
7. Remote Camp Location(s)			
Name & Location			
	Point Of Contact:		
	EMS Responders & Capability		
	Equipment Available on Scene:		
	Medical Emergency Channel:		
	ETA for Ambulance To Scene:		
	Air:		
	Ground:		
	Approved Helispot:		
	Lat:		
	Long:		
8. Prepared By (Medical Unit Leader)	9. Date/Time	10. Reviewed By (Safety Officer)	11. Date/Time
DAVID OWEN	11/15/2016 1337		

MEDICAL PLAN (ICS 206)

12. Medical Incident Procedures

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

Medical Incident Report

Use items one through nine to communicate situation to communications/dispatch.

1. CONTACT COMMUNICATIONS/DISPATCH

Ex: "Communications: Div. Alpha. Stand-by for Priority Medical Incident Report." (If life threatening, request designated frequency be cleared for emergency traffic.)

2. INCIDENT STATUS: Provide incident summary and command structure.

Nature of Injury/Illness		<i>Describe the injury (Ex: Broken leg with bleeding)</i>
Incident Name		<i>Geographic Name + "Medical" (Ex: Trout Meadow Medical)</i>
Incident Commander		<i>Name of IC</i>
Patient Care		<i>Name of Care Provider (Ex: EMT Smith)</i>

3. INITIAL PATIENT ASSESSMENT:

Complete this section for each patient. This is only a brief, initial assessment. Provide additional patient info after completing this 9 Line Report.

Number of Patients:	Male / Female	Age:	Weight:
Conscious?	<input type="checkbox"/> YES	<input type="checkbox"/> NO = MEDEVAC!	
Breathing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO = MEDEVAC!	
Mechanism of Injury: <i>What caused the injury?</i>			
Lat/Long (Datum WG884) Ex: N 40° 42.45' x W 123° 03.24'			

4. SEVERITY OF EMERGENCY, TRANSPORT PRIORITY

SEVERITY	TRANSPORT PRIORITY
<input type="checkbox"/> URGENT-RED Life threatening injury or illness. Ex: Unconscious, difficulty breathing, bleeding severely, 2 - 3 degree burns more than 4 palm sizes, heat stroke, disoriented.	Ambulance or MEDEVAC helicopter. Evacuation need is IMMEDIATE.
<input type="checkbox"/> PRIORITY-YELLOW Serious Injury or illness. Ex: Significant trauma, not able to walk, 2 - 3 degree burns not more than 1-2 palm sizes.	Ambulance or consider air transport if at remote location. Evacuation may be DELAYED.
<input type="checkbox"/> ROUTINE-GREEN Not a life threatening injury or illness. Ex: Sprains, strains, minor heat-related illness.	Non-Emergency. Evacuation considered Routine of Convenience.

5. TRANSPORT PLAN:

Air Transport: (Agency Aircraft Preferred)			
<input type="checkbox"/> Helispot	<input type="checkbox"/> Short-haul/Hoist	<input type="checkbox"/> Life Flight	<input type="checkbox"/> Other
Ground Transport:			
<input type="checkbox"/> Self-Extract	<input type="checkbox"/> Carry-Out	<input type="checkbox"/> Ambulance	<input type="checkbox"/> Other

6. ADDITIONAL RESOURCE/EQUIPMENT NEEDS:

<input type="checkbox"/> Paramedic/EMT(s)	<input type="checkbox"/> Crew(s)	<input type="checkbox"/> SKED/Backboard/C-Collar
<input type="checkbox"/> Burn Sheet(s)	<input type="checkbox"/> Oxygen	<input type="checkbox"/> Trauma Bag
<input type="checkbox"/> Medication(s)	<input type="checkbox"/> IV/Fluid(s)	<input type="checkbox"/> Cardiac Monitor/AED
<input type="checkbox"/> Other (i.e. splints, rope rescue, wheeled litter)		

7. COMMUNICATIONS:

Function	Channel Name/Number	Receive (Rx)	Tone/NAC *	Transmit (Tx)	Tone/NAC *
Ex: Command	Forest Rpt, Ch. 2	168.3250	110.9	171.4325	110.9
COMMAND					
AIR-TO-GRND					
TACTICAL					

*(NAC for digital radio system)

8. EVACUATION LOCATION:

Lat/Long (Datum WG884) EX: N 40 42.45' x W 123 03.24'	
Patient's ETA to Evacuation Location:	
Helispot/Extraction Size and Hazards:	

9. CONTINGENCY:

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

REMEMBER:

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



INCIDENT Weather Forecast



FORECAST NO: 2

NAME OF FIRE: Pinnacle Mountain

PREDICTION FOR: Tuesday

UNIT: South Carolina Forestry Commission

SHIFT DATE: November 16

SIGNED: Mike Proud

TIME AND DATE 1630 November 15, 2016
FORECAST ISSUED:

Incident Meteorologist

WEATHER DISCUSSION: High pressure across the region will result in a slow warming trend over the next couple of days as relative humidity slowly decreases. With a weak pressure gradient over the area winds will remain terrain driven during the day at 6 mph or less, becoming light and variable for the overnight. Change will begin arriving late Friday into early Saturday as a cold front approaches from the west, with winds becoming strong and gusty behind the front late Saturday morning through Sunday.

WEATHER FORECAST For 2150 ft

WEATHER: Sunny

TEMPERATURES: Today's High 64-67 Tonight's Low 42-46
HUMIDITY: Today's Min 35-38% Tonight's Max 75-80%

20 FT WINDS: Variable at 2-4 mph through about 1100...then upslope 3-6 mph.

HAINES INDEX: 4
LAL 1
CWR 0%

STABILITY/INVERSION: Strong inversion breaking between 1030-1100.

MIXING HEIGHT: Around 4100 feet.

TRANSPORT WINDS: West at 4-7 mph.

OUTLOOK FOR THURSDAY: Mostly sunny. Max temp 65-68. Min RH 32-36%. Light and variable winds less than 3 mph in the morning...becoming south-southwest 4-6 mph in the afternoon. Haines 4. LAL 1.

OUTLOOK FOR FRIDAY: Mostly sunny, becoming partly cloudy by evening. Max 68-72. Min RH 31-35%. South-southwest winds 5-8. Haines 4. LAL 1.

EXTENDED FORECAST:

SATURDAY: Partly sunny. A 30% chance of showers. Max temp 55-58. Min RH 35-40%. Northwest winds 10-12 mph with gusts to 18 mph.

SUNDAY: Mostly sunny. Max temp 50-54. Min RH 27-31% Northwest winds 10-12 mph with gusts to 18 mph.

MONDAY: Mostly sunny. Max temp 51-55. Min RH 23-28%. Northwest winds 5-8 mph.

Pinnacle Mountain Fire General Weather Outlook

For Planning Purposes Only, see the IAP for the Official Forecast

Forecast made 15 November, 2016 - Incident Meteorologist (IMET) Mike Proud

	Wed	Thu	Fri	Sat	Sun	Mon
Date	11/16	11/17	11/18	11/19	11/20	11/21
Watch/Warning	None	None	None	None	None	None
Clouds at 1400 (%)	10	0	20	40	10	10
MinT/MaxT	45 / 65	46 / 67	47 / 70	46 / 58	32 / 45	34 / 46
MaxRH/MinRH	/ 36%	77% / 34%	58% / 34%	65% / 37%	85% / 29%	70%/24%
Precip Chance	0%	0%	5%	30%	10%	0%
Wind Morning	VRB 1	VRB 1	VRB 4	W 7	NW 11	NW 7
Morning Gust	4	4	7	10	15	12
Wind Afternoon	Upslope 3	SSW 5	SSW 6	NW 12	NW 14	NW 7
Afternoon Gust	6	8	9	18	18	12
Haines Index	4	4	4	3	4	4

KEY: Forecast conditions at 2150 ft

Moderate Burning

Conditions

Take Caution - Critical

Burning Conditions

Extreme Burning

Conditions

Clouds at 1400

>24 %

15 to 24 %

<15 %

MaxT

<70 F

70 to 80 F

>80 F

MinRH

>40

25 to 40

<25

Precip Chance

>40

20 to 40

<20

Wind

< 10 mph

10 to 15 mph

>15 mph

Wind Gust

<15 mph

15-25 mph

>25 mph

Haines Index

<4

4

>4

{Four or more} EXTREME blocks in a day equals the potential for a Critical Weather Day

CREW TIME REPORT

(1) CREW NAME				(2) CREW NUMBER			
(3) OFFICE RESPONSIBLE			(4) INCIDENT NAME		(5) INCIDENT NUMBER		
(6)	(7)	(8)	(9)		(10)		
REMARKS NO.	NAME OF EMPLOYEE	CLASSIF- ICATION	DATE		DATE		
			MILITARY TIME		MILITARY TIME		
			ON	OFF	ON	OFF	ON
(11) REMARKS							
(12) OFFICER-IN-CHARGE				(13) TITLE (Officer-in-Charge)			
(14) NAME (Person Posting to Emergency Time Report)					(15) DATE (Posted)		

SCFC Form SF-261

(Instructions on Back)

NOTES FOR CTR:

It is essential that employees and supervisors accurately and clearly report time on the CTR in order to facilitate recording of time on the OF-288 (Emergency Time Incident Report).

A CTR is prepared for **each operational period**. Time must be reported in an **accurate, legible** fashion **at the end of the operational period and given to the Time Unit after getting Supervisor's signature**. Supervisor certifies time worked by signing the CTR. **Individuals may not sign their own CTR.**

Travel time is reported with a "T" entered in the Remarks No. (6) column.

Time spent eating must be shown as a break on the Crew Time Report. A **meal period of at least 30 minutes must be taken for each work shift** (a minimum 30 minute break for every shift of eight hours).

Military time shall be used on all records pertaining to timekeeping and time recording.

Round times to the **tonearest quarter hour**.

Military Time Conversion Chart starting at noon:

<u>EST</u>	<u>Military Time</u>	<u>EST</u>	<u>Military Time</u>	<u>EST</u>	<u>Military Time</u>
Noon	1200	5pm	1700	10pm	2200
1pm	1300	6pm	1800	11pm	2300
2pm	1400	7pm	1900	Midnight	2400 or 0000
3pm	1500	8pm	2000		
4pm	1600	9pm	2100		

INSTRUCTIONS FOR COMPLETION OF CREW TIME REPORT, SF-261

Time shall initially be recorded on Crew Time Report, SF-261 and transferred to the Emergency Firefighter Time Report, OF-288.

A CTR is prepared for each operational period as outlined below.

Time must be reported in an accurate, legible fashion.

At the end of the operational period, the original is signed by the Supervisor and given to the Time Unit. A copy is retained by the supervisor.

1. **Crew Name.** Use crew name or name of single resource (individual).
2. **Crew Number.** Enter assigned resource order number (will be given).
3. **Office Responsible for Fire.** Enter incident agency (appropriate federal, state, or local office).
4. **Incident Name.** Enter assigned incident name (will be given).
5. **Incident Number.** Enter incident order number (will be given).
6. **Remarks No.** Enter number that corresponds to Remarks in Section 11 or "T" for travel time.
7. **Name of Employee.** Self-explanatory.
8. **Classification.** Enter appropriate pay classification (AD-A through AD-M, GS, WG, etc.).
9. **Date.** Enter month/day/year (8/3/XX) in Date Block. Under Military Time Heading, enter military clock time for each period of on-shift time during the operational period. **Round to nearest quarter hour (15 minutes).**
10. **Date.** If the operational period involves two days, use column 10 as instructed in Number 9 above.
11. **Remarks.** Enter any pertinent information such as injury, discharge, transfer, position change, reason for hazard/environmental differential, compensable meal break, etc. Include Remarks No. from Item 6.
12. **Officer-in-Charge.** Signature of your supervisor. You may not sign your own CTR.
13. **Title.** Officer-in-Charge. Self-explanatory (ICS position).
14. **Name.** Signature of person (PTRC or TIME) recording time on the Emergency Firefighter Time Report, OF-288.
15. **Date.** Date that time was recorded on OF-288.

SAMPLE

CREW TIME REPORT

(1) CREW NAME Debbie Kiser			(2) CREW NUMBER O-124			
(3) OFFICE RESPONSIBLE (Agency) SCFC		(4) INCIDENT NAME NDMS Exercise		(5) INCIDENT NUMBER SC-FCC-2015-0001		
(6)	(7)	(8)	(9)		(10)	
REMARKS NO.	NAME OF EMPLOYEE	CLASSIFICATION	DATE 5 / 12 / 2015		DATE	
			MILITARY TIME		MILITARY TIME	
			ON	OFF	ON	OFF
T	Debbie Kiser	AD-K	0600	0700		
			0700	1200		
			1230	1800		
T			1800	1900		
(11) REMARKS T - Travel						
(12) OFFICER-IN-CHARGE <i>Cathy Nordeen</i>			(13) TITLE (Officer-in-Charge) FSC			
(14) NAME (Person Posting to Emergency Time Report) <i>Michelle Johnson</i>					(15) DATE (Posted) 5 / 12 / 2015	

EMERGENCY EQUIPMENT SHIFT TICKET				E -		
<i>NOTE: The responsible Government Officer will update this form each day or shift and make initial and final equipment inspections.</i>						
1. AGREEMENT NUMBER			2. CONTRACTOR (name)			
3. INCIDENT OR PROJECT		4. INCIDENT NUMBER		5. OPERATOR (name)		
6. EQUIPMENT MAKE		7. EQUIPMENT MODEL		8. OPERATOR FURNISHED BY <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> GOVERNMENT		
9. SERIAL NUMBER		10. LICENSE NUMBER		11. OPERATING SUPPLIES FURNISHED BY <input type="checkbox"/> CONTRACTOR (wet) <input type="checkbox"/> GOVERNMENT (dry)		
12. DATE MO/DAY/YR	13. EQUIPMENT USE				14. REMARKS (released, down time and cause, problems, etc.)	
	START	(circle one) STOP	HOURS/DAYS/MILES WORK	SPECIAL		
					15. EQUIPMENT STATUS <input type="checkbox"/> a. Inspected and under agreement <input type="checkbox"/> b. Released by Government <input type="checkbox"/> c. Withdrawn by Contractor	
					16. INVOICE POSTED BY (Recorder's initials)	
17. CONTRACTOR OR AUTHORIZED AGENT'S SIGNATURE			18. DATE SIGNED		19. SUPERVISOR'S SIGNATURE	

SCFC - FORM 297

INSTRUCTIONS

- Agreement No.** Enter number from the EERA or the I-BPA, leave blank if SCFC.
- Contractor.** Enter the contractor's name as shown on the EERA or on the I-BPA. Enter the contractor's resource order number.
- Incident or Project Name** Enter incident name. (will be given)
- Incident Number.** Enter the incident number. (will be given)
- Operator.** Enter the name of the operator, or of all operators in Remarks; note the operational periods that each operator was on duty.
- Equipment Make.** Enter the make of equipment.
- Equipment Model.** Enter the model of equipment.
- Operator.** Check one, in accordance with the EERA or Clause D.1 of the I-BPA. Check Gov't if SCFC.
- Serial Number.** Enter serial number of equipment, or state decal number.
- License Number.** If equipment is licensed, enter license number of equipment.
- Operating Supplies.** Check one, in accordance with the EERA or the I-BPA. If state vehicle check govt.
- Date.** Enter date of use.
- Equipment Use.** Circle either hours, days, or miles as to how paid. Record the actual hours worked. Enter the start and stop times or beginning and ending mileage in the columns designated as Start/Stop. Calculate the hours worked or miles driven and enter in the Work column. If the rate of pay is by the day, enter "1".
- Remarks.** Enter any information necessary to administer the terms of the EERA or I-BPA.
- Equipment Status.** Mark the appropriate blocks.
- Invoice Posted By.** Enter time recorder initials.
- Contractor's or Authorized Agent's Signature** To be completed and signed by the appropriate contractor representative or employee, normally at the end of each work shift or break in operational periods.
- Date Signed.** Enter the date shift ticket is signed.
- Supervisor's Signature.** To be signed by the supervisor of the equipment.

EMERGENCY EQUIPMENT SHIFT TICKET

NOTE: The responsible Government Officer will update this form each day or shift and make initial and final equipment inspections.

E - 166

1. AGREEMENT NUMBER

2. CONTRACTOR (name)

3. INCIDENT OR PROJECT
NDMS Exercise

4. INCIDENT NUMBER
SC-FCC-2015-0001

5. OPERATOR (name)
Doug Mills

6. EQUIPMENT MAKE
Dodge

7. EQUIPMENT MODEL
2500 Truck

8. OPERATOR FURNISHED BY
 CONTRACTOR GOVERNMENT

9. SERIAL NUMBER
12270

10. LICENSE NUMBER
SG76925

11. OPERATING SUPPLIES FURNISHED BY
CONTRACTOR (wet) GOVERNMENT (dry)

12. DATE MO/DAY/YR	13. EQUIPMENT USE			
	(circle one) HOURS/DAYS/MILES			
	START	STOP	WORK	SPECIAL

14. REMARKS (released, down time and cause, problems, etc.)

04/23/09	164,853	165,130	277	travel
----------	---------	---------	-----	--------

04/24/09	165,130	165,220	90	
----------	---------	---------	----	--

04/25/09	165,220	165,313	93	
----------	---------	---------	----	--

04/26/09	165,313	165,397	84	
----------	---------	---------	----	--

15. EQUIPMENT STATUS
 a. Inspected and under agreement
 b. Released by Government
 c. Withdrawn by Contractor

--	--	--	--	--

16. INVOICE POSTED BY **DK**
(Recorder's initials)

















17. CONTRACTOR OR AUTHORIZED AGENT'S SIGNATURE
Doug Mills

18. DATE SIGNED
4/26/09

19. SUPERVISOR'S SIGNATURE
Mike Bozzo, IC

Camp Locations Map
Pinnacle Mtn Fire
US-SC-SCS-11102016
11/14/2016

Legend

-  Plans/Finance/PIO
-  Incident Entrance
-  Helispot
-  Men's Restroom
-  Parking
-  Staging
-  Women's Restroom
-  Helispot
-  OPS/LOGS
-  Parking/Staging
-  Pickens Co. IMT
-  Red Cross
-  Shelter
-  Structure Protection
-  Yurt
-  Roads

