

INCIDENT ACTION PLAN

JUNIPER SWAMP

FL-FNF-001075

P8SK91

Tuesday



OPERATIONAL PERIOD

5/6/2025 0600

to

5/10/2025 2000

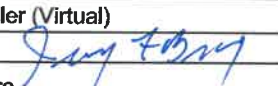


INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: <p style="text-align: center;">JUNIPER SWAMP</p>	2. Operational Period: <div style="display: flex; justify-content: space-between;"> <div>Date From: 5/6/2025 Time From: 0600</div> <div>Date To: 5/10/2025 Time To: 2000</div> </div>																				
3. Objective(s):																					
<u>Management Objectives</u>																					
<u>Leader's Intent</u> <ol style="list-style-type: none"> 1. As with any fire program, firefighter and public safety is our top priority. No activity is so critical that safety rules should be overlooked. You will be expected to know, apply, and practice safety protocols throughout your assignment here. 2. The Ten Standard Fire Orders and The Eighteen Watch-Out Situations will be adhered to by every firefighter and must be evaluated and mitigated before you engage in fire operations on the ground. 3. Utilize strategies and tactics that allow for appropriate risk management considerations and mitigations of hazards. 4. Keep the fire within the perimeter of FSR105, Hwy12, Big Gulley Creek and Forest Service Boundary Line. 5. Mitigate smoke impacts on Hwy 12, Bristol and Camel Lake Campground utilizing fire behavior, smoke and fire spread models. 6. Utilize the input from resource advisors into safe firefighting strategies and tactics that minimize damage to all known natural, cultural and historical resources and sites. 7. Keep the public well informed on all activities through social media, personal and posted information. 																					
<u>Control Objectives</u> <p>Private property and infrastructure located to the north and southeast of the fire. Camel Lake Campground</p> <p>Apalachicola Work Center</p> <p>Hwy 12 & Utilities located along Hwy 12</p> <p>Florida National Scenic Trail & Trail Head.</p> <p>Red-cockaded woodpecker habitat and cavity trees.</p> <p>Bee apiaries within and adjacent to the fire perimeter.</p> <p>Marked timber located to the southeast of the fire in burn units 15 & 16.</p>																					
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 <table style="width: 100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> ICS 203</td> <td><input type="checkbox"/> ICS 215A</td> <td><input checked="" type="checkbox"/> Demob List</td> <td><input checked="" type="checkbox"/> ICS 214</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 204</td> <td><input checked="" type="checkbox"/> ICS 220</td> <td><input type="checkbox"/> Training Message</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205</td> <td><input type="checkbox"/> Facility Maps</td> <td><input checked="" type="checkbox"/> Safety Message</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 206</td> <td><input checked="" type="checkbox"/> Weather Forecast</td> <td><input checked="" type="checkbox"/> PIO Message</td> <td></td> </tr> <tr> <td><input type="checkbox"/> ICS 208</td> <td><input type="checkbox"/> Fire Behavior</td> <td><input checked="" type="checkbox"/> Finance Message</td> <td><input type="checkbox"/></td> </tr> </table>		<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 215A	<input checked="" type="checkbox"/> Demob List	<input checked="" type="checkbox"/> ICS 214	<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 type="checkbox"/> Facility Maps	<input checked="" type="checkbox"/> Safety Message	<input type="checkbox"/>	<input checked="" type="checkbox"/> ICS 206	<input checked="" type="checkbox"/> Weather Forecast	<input checked="" type="checkbox"/> PIO Message		<input type="checkbox"/> ICS 208	<input type="checkbox"/> Fire Behavior	<input checked="" type="checkbox"/> Finance Message	<input type="checkbox"/>
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7. Prepared By: Jerry Brock	Position/Title: PSC3	Signature:																			
8. Approved by Incident Commander:	Jason Lago	Signature: _____																			

ICS 202

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: JUNIPER SWAMP		2. Operational Period: Date From: 5/6/2025 Date To: 5/10/2025 Time From: 0600 Time To: 2000	
3. Incident Commander(s) and Command Staff:		7. Operation Section:	
IC/UC's	Jason Lago/ Aaron Edwards Jr.	Operations	Joe Brinson
Deputy		Deputy Operations	
IC Trainee	Aaron Edwards Jr.	Night Ops	
Safety Officer	Bart Kicklighter		
Information Officer	Melanie Lynn Banton	Branch	
Liaison Officer		Division/Group	M Will Hudson
		Division/Group	T/Z Dan Matthews
		Division/Group	IA Eric Gladney, Ty Cobb(t)
4. Agency/Organization Representatives:			
Agency/Organization	Name	Division/Group	
USFS	Bob Claybrooke	Branch	
	Alex Schwartz(t)	Division/Group	
		Division/Group	
		Division/Group	
		Division/Group	
		Branch	
		Division/Group	
		Division/Group	
		Division/Group	
		Division/Group	
		Staging Area	
5. Planning Section:			
Chief	Jerry Brock	Division/Group	
Deputy		Division/Group	
Resource Unit	Jason Kammann	Division/Group	
Situation Unit		Division/Group	
Documentation Unit		Division/Group	
Demobilization Unit	Jason Kammann	Division/Group	
	Justin Martens (virtual), Mike Bodziak(t)	Division/Group	
FBAN		Division/Group	
IMET	Dan Byrd	Division/Group	
Training Specialist		Air Operations Branch	
Status Check-In		Air Support Group Supervisor	
ARA		Air Tactical Group Supervisor	
6. Logistics Section		Helibase Manager Trixie Smith	
Chief	David McVay		
Deputy		8. Finance/Administration Section:	
ORDM	Sherri Kite, Kristen Taylor(t)	Chief	Sirena Fugitt (virtual)
Facilities Unit		Time Unit	
Ground Support Unit		EQTR / PTRC	Emilie Parrish(t) Sara Carter
Communications Unit		Comp/Claims Unit	
Medical Unit		Cost Unit	Kailee Nosler (Virtual)
Prepared By: Name: Jerry Brock Position/Title: PSC3		Signature: 	
ICS 203		Date/Time: 5/5/2025 2300 hours	

**CONTROLLED UNCLASSIFIED
INFORMATION//BASIC**


NIMS LAP

**CONTROLLED UNCLASSIFIED
INFORMATION//BASIC**

NIMS LAP

**CONTROLLED UNCLASSIFIED
INFORMATION//BASIC**

NIMS IAP CONTROLLED UNCLASSIFIED INFORMATION/BASIC

INCIDENT RADIO COMMUNICATIONS PLAN				Incident Name		Date/Time Prepared		Operational Period Date/Time	
				Juniper Swamp		05/05/2025 1700		05/06/2025 05/10/2025 0600 - 2000	
Ch #	Function	Channel Name/Tunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	Tx Tone/NAC	Mode A, D or M	Remarks
1	COMMAND	Sumatra Admin	ALL DIVS	170.5500	\$F7E	164.1250	\$5B6	D	ADMIN REPEATER
2	COMMAND	FSU Admin	ALL DIVS	170.5500	\$F7E	164.1250	\$68F	D	ADMIN REPEATER
3	TACTICAL	R8 fire	IA, DIV M	166.5625		166.5625		A	IA, DIV M
4	Air to Ground	A/G 15	Primary	167.5250		167.5250		A	ALL DIVS PRIMARY
5	Air to Ground	A/G 71	Secondary	168.6750		168.6750		A	ALL DIVS SECONDARY
6	COMMAND	SUMATRA Fire	ALL DIVS	170.5250	\$F7E	163.6875	\$707	D	FIRE REPEATER
7	COMMAND	FSU Fire	ALL DIVS	170.5250	\$F7E	163.6875	\$585	D	
8	TACTICAL	FL Fire	DIV T	169.1750		169.1750		A	DIV T
9	TACTICAL	Common 2	DIV Z	163.7125		163.7125		A	DIV Z
10	TACTICAL	FFS Tac3		151.2350		151.235	156.7	A	Florida Forest Service
11	TACTICAL	FFS Tac4		151.2950		151.2950	156.7	A	Florida Forest Service
12	COMMAND	Wak FD		154.3350		158.9025	186.2	A	
13		FFS Franklin E		159.2250	\$02D	151.1825	\$02D	A	FFS repeater
14		FFS Liberty N		159.2250	\$02B	151.1825	\$02B	A	FFS Repeater
15	TACTICAL	VFIR21W (White)	ALL DIVS	154.2800		154.2800	156.7	A	VFIRE 21
16	EMERGENCY	Air Guard	ALL DIVS	168.6250		168.6250	110.9	A	EMERGENCY
Special Instructions:									
Prepared By (Communications Unit)						Signature:		Date: 05/05/2025 1700	
Guy Prather									

Safety Message

Safety Starts with You!

We are ALL accountable for SAFE behaviors and actions

Name: **Juniper Swamp Fire**

Date: **5/05/2018 – 5/09/2025**

**LOOKOUTS, COMMUNICATIONS, ESCAPE ROUTES, SAFETY
ZONES**

Do you use it? Do your firefighters use it?



- **Type 3 organization remains in place through this week.**
- Conduct a QUALITY briefing on the line before tactical engagement, so everyone KNOWS the plan.
- If responding to an Initial Attack, make sure you know where to go and who you are working for.

Hazards, Risks, Concerns

Communications:

Ensure communications are in place and all personnel know frequencies.

Give clear instructions and be sure they are understood.

Ensure all personnel know operational assignments and emergency procedures.

Close the loop!

Weather & Fire Behavior:

Are you prepared for predicted fire behavior as forecasted?

Are you prepared for the possibility of more severe weather and fire behavior?

Transportation:

There are long drive times for visiting resources to/from hotels. Take your time.

Drive safely & defensively.

Cell phone use is not allowed while driving.

Heat Related Illness:

Pace yourself as you work in the heat of the day.

Take frequent breaks in a cooler area if possible.

Drink plenty of water both during your shift and off, regardless of outside temps.

Fatigue:

How many days have you been here on this assignment?

Fatigue has a cumulative effect. Get sufficient rest during down time.

Medical Emergencies:

Are you prepared to deal with a medical emergency?

Do you understand incident medical emergency procedures?

It may be a long way to medical facilities.

Safety Officer: Bart Kicklighter

AIR OPERATIONS SUMMARY ICS-220

Incident Name			
Juniper Swamp FL-FNF-001075			
Sunrise		Sunset	Pumpkin
0651		2018	2048
General Remarks, Safety Notes, Hazards, Air Operations Special Equipment, etc.			

***All GPS is to be collected in DD° MM.MMM'**
***Be cognizant of all overhead and environmental hazards while working with Aircraft**
***Clear drop area/lane before initiating drop sequence**
Everything is ordered through Operations to Tallahassee Dispatch
***** Check Regional Aircraft Availability with Tallahassee Dispatch *****

IF BE AWARE OF THUNDERSTORM DEVELOPMENT, HIGH WINDS & DETERIORATING CONDITIONS IF

Incident Frequencies	RX	Tone	TX	Tone	Order #
FM-Air to Ground					
A/G Primary - A/G 15	167.5250		167.5250		
A/G Secondary / 1A - A/G 71	168.6750		168.6750		
Deck	163.1000		163.1000		
Air Guard	168.6250		168.6250	110.90	

AM-Air to Air

[illegible]

HELICOPTERS - Helen Guard Helibase

FAA #	AS#	TYPE	Make/Model	Helibase	Avail	Stop	Remarks
N854H		Type 3	Bell 407	Helen Guard	0800	2000	Bucket, IA, Recon AV under Hurricane
3KT		Type 1	UH-61	Helen Guard	0800	2000	Tank

[illegible]

Time Prepared	1500		
Helen Guard Helibase	N 30° 18.41 W 84° 25.43	Date Prepared 05/05/25	Prepared By Jodi Plocher (t)
		Operational Period - Date 5/6-5/9/2025	HOURS OF OPERATION 0800-2000 Helen Guard Helibase
		TFR Information	Medivac Helicopter Information

tfr.faa.gov/tfr2/list.html	Fire Name	
	NOTAMS:	
	Altitude:	
	Frequency:	
	Hours:	
	Note: XXXX has a night time TFR XXXXX from XXXX XXXX	
Send costs to following emails: 2025juniperswamp.finance@frenet.gov sirena_fugitt@frenet.gov		
28HX can be used for Medical Transport. See ICS 206.		
Order ALS Helicopter through Dispatch		

Position	A#	O#	Name	Phone	EQUIPMENT/SUPPLIES
AOBD (t)			Keith Haskins	850-408-2678	
HEBM			Trixie Smith	850-933-1782	
HEBM (t)			Jodi Plocher LWD 5/19/25	775-934-9992	
HMGB - 54H			Stacey Staddler LWD 5/11/25	801-558-5706	
HMGB - 3KT			Even Collinsworth (LDW 5/13)	407-325-8215	
ATGS			Nichlas Pieper	Available KJAX	Dispatch information
LPL			Aaron Knobloch	Available KLCQ	"Tallahassee" - FL-FICC
					Aircraft Desk 850-523-8600
					fficc@fltrencol.gov

[illegible]

FIXED WING - Regional Support							
FAA #	A#	Call Sign	Make/Model	Base	Avail	Stop	Remarks
N635AC		T-160	RJ-85	KLCQ	0900	1900	IC Order through Dispatch
N635AC		T-167	RJ-85	KLCQ	0900	1900	

N470NA			T-40	BAE 146	KLCQ	0900	1900

Public Information

Melanie Banton – PIO

352-219-7120

melaniebanton@yahoo.com

If sending pictures, please ensure:

You are in a safe position to take photos

Firefighters should have proper PPE

Please provide:

- Name of person providing photo,
- Date,
- Description and
- Location of

Photos can be emailed, texted, airdropped or downloaded

Photos can also be placed in the TEAMS Public information folder if you have access

JUNIPER SWAMP FINANCE PROCEDURES

Finance Email : 2025.juniperswamp.Finance@firenet.gov

Finance Contact – Sirena Fugitt, 202-738-6130

DOCUMENTS TO EMAIL TO FINANCE

Scan QR Code for quick link to the finance inbox



Overhead and Crews

Regular Government Personnel & ADs attachments:

@Check-In: Crew Manifests, MOUs, or Cooperative Agreement (if applies), AD Casual Hire Form/Resource Order

Daily: Crew Time Report (CTR), Shift Ticket (*when applies*), receipts(fuel issues, travel receipts, etc.)

@Demob: Signed OF288 and/or Final Equipment Use Invoice

Contract Resources

Private Contractor Attachments:

@Check-In: Resource Order, Finance pages of Contract/Agreement, Certifications (*if required*), Pre-Inspection

Daily: Shift Tickets, receipts (fuel issues, claims, etc.)

@Demob: Contractor Evaluations, Final Shift Tickets and receipt for Addition/Deductions, Post-Inspection, Final Signed Invoices

FINANCE DEMOB PROCEDURES

All Resources will be sent their **DRAFT OF-288/OF-286** via Finance email. Resources will review their document and reply to Finance with the statement “No Corrections Necessary” or a description of needed corrections. After Finance receives the email, any discrepancies will be resolved. When completed the resource will be sent their **FINAL DOCUMENT** for signature with both parties receiving a final signed copy.

05/06/2025

TENTATIVE RELEASE

JUNIPER SWAMP US-FL-FNF-001075

EQUIPMENT

E-25	0000	(MBM2)	MBM2 - GULF COAST
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05/07/2025

E-15	0000	(ENG6)	OCALA 621
E-33	0000	(WTS2)	WTS2 WILDLANDS SERVICE

05/08/2025

EQUIPMENT

E-31	0000	(ENG6)	ENG6 - MSMNF 6171
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OVERHEAD

O-41	0000	(EMTF)	GRIER, SHANNON
O-42	0000	(EMTF)	WADE, EMMA

05/10/2025

EQUIPMENT

E-27	0000	(VUTV)	ANF UTV 7578
E-32	0000	(ENG6)	ENG6 - KYDBF STEARNS E621

UNIT LOG (ICS 214)

1. Incident Name:
JUNIPER SWAMP

Date From: 5/6/25 Date To: 5/10/25

Time From:	0600	Time To:	2000
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3. Unit Name/Designators	

4. Unit Leader (Name and ICS Position)

5. Personnel Assigned/Designators	
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NAME _____

ICS POSITION

HOME BASE

6. Activity Log (Continue on Reverse)

TIME

MAJOR EVENTS	
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7. Prepared By:		Date/Time:	NIMS IAP
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Date/Time: _____ NIMS IAP

Medical Plan (ICS 206 WF)
Controlled Unclassified Information//Basic

1. Incident/Project Name:		2. Operational Period: 0600-2200				
JUNIPER SWAMP		Date/Time From: 05/02/2025 0600 FRI		Date/Time To: 05/02/2025 2000 FRI		
3. Ambulance Services						
Name	Complete Address	Phone & EMS Frequency	Advanced Life Support (ALS) Yes No			
LIBERTY COUNTY	12499 NW POGO STREET BRISTOL, FL 32321	(850) 643-2235	X			
FRANKLIN COUNTY (WEEMS)	135 AVENUE G APALACHICOLA, FL 32320	(850) 653-8853	X			
LEON COUNTY	911 EASTERWOOD DRIVE TALLAHASSEE, FL 32311	(850) 606-2100	X			
WAKULLA COUNTY	340 TRICE LANE CRAWFORDVILLE, FL 32327	(850) 926-5424	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 Air Ground		Phone	Helipad Yes No	Level of Care Facility
CALHOUN LIBERTY 20740 BURNS AVENUE BLOUNTSTOWN, FL 32424	Lat: Long: VHF:		20-60 MINUTES	(850) 674-5411		X
TALLAHASSEE MEMORIAL 1300 MICCOSUKEE ROAD TALLAHASSEE, FL 32308	Lat: Long: VHF:	20 MINUTES	60 MINUTES	(850) 431-1155	X	TRAUMA
SHANDS 1515 SW ARCHER ROAD GAINESVILLE, FL 32608	Lat: Long: VHF:	50 MINUTES	2.5 HOURS	(352) 265-0111	X	TRAUMA/BURN
HCA FLORIDA CAPITAL 2626 CAPITAL MEDICAL BLVD TALLAHASSEE, FL 32308	Lat: Long: VHF:	20 MINUTES	60 MINUTES	(850) 325-5000	X	
8. Prepared By (Medical Unit Leader)						
9. Date/Time		10. Reviewed By (Safety Officer)			11. Date/Time	
05/02/2025		BART KICKLIGHTER				

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

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.

Ex: Sprains, strains, minor heat-related illness.

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	<div><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° - 3° burns more than 4 palm sizes, heat stroke, disoriented.</i></div> <div><input type="checkbox"/> YELLOW/PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary. <i>Ex: Significant trauma, unable to walk, 2° - 3° burns not more than 1-3 palm sizes.</i></div> <div><input type="checkbox"/> GREEN/PRIORITY 3 Minor Injury or illness. Non-Emergency transport</div>
Nature of Injury or Illness & Mechanism of Injury	<div></div> <div style="text-align: right;"><i>Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)</i></div>
Transport Request	<div></div> <div style="text-align: right;"><i>Air Ambulance / Short Haul/Hoist Ground Ambulance / Other</i></div>
Patient Location	<div></div> <div style="text-align: right;"><i>Descriptive Location & Lat. / Long. (WGS84)</i></div>
Incident Name	<div></div> <div style="text-align: right;"><i>Geographic Name + "Medical" (Ex: Trout Meadow Medical)</i></div>
On-Scene Incident Commander	<div></div> <div style="text-align: right;"><i>Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)</i></div>
Patient Care	<div></div> <div style="text-align: right;"><i>Name of Care Provider (Ex: EMT Smith)</i></div>

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					
AIR-TO-GRND					
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.