

# **Sandy Fire**

## **Incident Action Plan**

### **FL-BCP-001596**

**Operational Period**

**06/02/25**

**0600-2200**



**Link Tree**

- Maps
- IAP
- Check-In

**Account Numbers**  
**NPS – PF.FSS1L9025.00.1**  
**USFS – PPS1L9 (1532)**



## INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b>	<b>2. Operational Period:</b> Date From: _____ Date To: _____ Time From: _____ Time To: _____																
<b>3. Objective(s):</b>																	
<b>4. Operational Period Command Emphasis:</b>																	
General Situational Awareness																	
<b>5. Site Safety Plan Required?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Approved Site Safety Plan(s) Located at:</b>																	
<b>6. Incident Action Plan</b> (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%;"><u>Other Attachments:</u></td></tr><tr><td><input 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	<u>Other Attachments:</u>	<input 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	<u>Other Attachments:</u>															
<input 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"/> _____															
<b>7. Prepared by:</b> Name: _____ Position/Title: _____ Signature: _____																	
<b>8. Approved by Incident Commander:</b> Name: _____ Signature: _____																	
ICS 202	IAP Page _____	Date/Time: _____															

# ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> Sandy Fire		<b>2. Operational Period:</b> Date From: 06/02/2025 Date To: 06/02/2025 Time From: 0600 Time To: 2200	
<b>3. Incident Commander(s) and Command Staff:</b>		<b>7. Operations Section:</b>	
IC/UCs	Pat Edwards	Chief	Joe Smith / Joshua Moore (T)
		Deputy	
Deputy		Staging Area	
Safety Officer	Michael Heard	<b>Branch</b>	
Public Info. Officer	Rikki Hoopes	Division/Group	Alpha Unstaffed
Liaison Officer		Division/Group	Zulu Carl Coppert
<b>4. Agency/Organization Representatives:</b>		Division/Group	Zulu Aaron Babin (t)
Agency/Organization	Name	Division/Group	
BICY Superintendent	Tom Forsyth	Group	
SOFL FMO	James Sullivan	Group	
BICY DO	Orlando Genao	Group	
Seminole FMO	Fred Boehm	<b>Branch</b>	
Micco. Public Safety	Chief Campbell	Branch Director	
		Deputy	
<b>5. Planning Section:</b>		Division/Group	
Chief	Carol O'Bryan	Division/Group	
GISS	Jill Housteknecht / RIST	Division/Group	
		Division/Group	
		Division/Group	
		<b>Branch</b>	
		Branch Director	
		Deputy	
		Division/Group	
		Division/Group	
		Division/Group	
<b>6. Logistics Section:</b>		Division/Group	
Chief		Division/Group	
Deputy		<b>Air Operations Branch</b>	
<b>Support Branch</b>		Air Support Group	JR Sullivan
Director		Air Attack	Michael Gue
Supply Unit			
Facilities Unit		<b>8. Finance/Administration Section:</b>	
Ground Support Unit		Chief	Anna Lee
<b>Service Branch</b>		Deputy	
Director		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
Food Unit		Cost Unit	
<b>9. Prepared by:</b> Name: Carol O'Bryan		Position/Title: PSCC Signature: _____	
ICS 203	IAP Page _____	Date/Time: 06/1/2025	

<b>FIRE BEHAVIOR FORECAST</b>	
<b>FORECAST NUMBER: 4</b>	<b>TYPE OF FIRE:</b> Wildland
<b>FIRE NAME:</b> Sandy	<b>OPERATIONAL PERIOD:</b> 06-02
<b>DATE ISSUED:</b> 06-01	<b>TIME ISSUED:</b> 1700
<b>UNIT:</b> Big Cypress Preserve	<b>WRITTEN:</b> David Quisenberry, FBAN <b>Signed:</b> <i>David Quisenberry</i>
<b>FUEL ASSUMPTIONS:</b> 3 Fuel Models to consider: Fuel Model 7 (Southern Rough), GR6 (humid grass) TU3 (timber w/grass) Recent rainfall has significantly moderated fuel conditions across much of the fire area. Fine fuels in shaded or recently wetted areas are unlikely to burn. Fuels in open and well-exposed areas may dry enough to carry low-intensity fire later in the day, but only if ignition sources remain. Portions of the fire line have become inactive, and fire behavior in these areas is expected to be negligible.  ERCs remain elevated, though trending downward. 1000-hr fuel moistures are critically low but beginning to respond to recent precipitation. KBDI is holding around 640 and may continue to decline if daily rain persists. The area remains classified as D3 (Extreme Drought), but short-term moisture is reducing fire potential.	
<b>WEATHER:</b> Partly sunny in the morning becoming mostly cloudy. Showers and thunderstorms likely in the afternoon. <b>WIND (20 FT):</b> Light winds becoming southwest around 5 mph in the afternoon. <b>MAX TEMPERATURES:</b> 92 <b>Min RH</b> 58% <b>DISPERSION:</b> 40 MAX <b>MIXING HEIGHT</b> 3800 <b>TRANSPORT WINDS:</b> West 6 to 12 mph	
<b>GENERAL FIRE BEHAVIOR FORECAST:</b> Overall fire behavior is expected to remain minimal today, with much of the fire line likely inactive. Spread potential will depend heavily on whether active fire persisted through the rainfall. Where fire remains active in dry, sunny pockets, some low intensity smoldering or creeping may occur. Reignition of sheltered hot spots is possible in drier areas, particularly in open grass or brush where light winds and sun may dry surface fuels by late morning. However, sustained or aggressive fire spread is unlikely under current weather and fuel conditions. Storm outflows still present some risk of short-duration flare-ups, but without heat sources, the potential for perimeter growth will be limited. Spotting potential is reduced but not zero and previously observed spotting up to ½ mile remains possible if active fire persists during storm gusts.	
<b>INITIAL ATTACK:</b> Holdovers from recent lightning remain possible though unlikely due to accompanying precipitation. Most new fires would be low intensity unless aligned with unusually dry fuels and wind.	
<b>PREDICTIONS FOR MOST ACTIVE TIME OF PEAK BURNING PERIOD</b> <i>(If rainfall is spotty or light)</i>	
<b>Fuel Model</b>	<b>Fire Behavior</b>
Grass	ROS 3-13 Chains per Hour and 2 to 3' Flame lengths
Shrub (palmetto/southern rough)	ROS 3-12 Chains per Hour and 2 to 4' Flame lengths
Timber Litter w/grass	ROS 2-9 Chains per Hour and 1 to 4' Flame lengths
Spotting Distance	Recent Observations – Up to ½ mile during outflow wind event
Probability of Ignition	25–35% across models, trending downward
<b>AIR OPERATIONS:</b> Conditions for aviation operations should be mostly favorable early, but cumulus buildup by midday and increasing storm chances will require caution. Expect visibility reductions and possible grounding of aircraft during afternoon storms.	
<b>FIRE BEHAVIOR SAFETY:</b> Anticipate minimal fire activity in most areas but remain vigilant for lingering heat sources, especially in sheltered or sunny areas. Sudden flare-ups remain possible with outflow winds, but overall risk is low.	

# DIVISION/GROUP ASSIGNMENT LIST (ICS 204 WF)

Controlled Unclassified Information//Basic

1. Incident Name				3.			
Sandy Fire				Branch	Division Alpha		
2. Operational Period 06/02/2025							
Date/Time From: 0600		Date/Time To: 2200					
4. Operations Personnel							
Operations Chief	Joe Smith Joshua Moore (t)			Division/Group Supervisor		Unstaffed	
Branch Director				Air Attack Supervisor			
5. Resources Assigned this Period							
Strike Team/Task Force/ Resource Designator	EMT	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
6. Control Operations/Work Assignments:"							
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						Digital	
Tactical Div/Group	FWSTAC1	166.7500	0000	166.7500	0000	Analog	
Tactical Div/Group						Analog	
Air to Ground	A/G85	168.3250	0000	168.3250	0000	Analog	
9. Prepared by (Resource Unit Leader) Carol O'Bryan - PSCC			Approved by (Planning Section Chief) /s/ Carol O'Bryan			Date 06/1/25	Time 1600

# DIVISION/GROUP ASSIGNMENT LIST (ICS 204 WF)

Controlled Unclassified Information//Basic

1. Incident Name				3.			
Sandy Fire				Branch	Division <b>Zulu</b>		
Date/Time From: 0600		Date/Time To: 2200					
4. Operations Personnel							
Operations Chief	Joe Smith Joshua Moore (t)			Division/Group Supervisor		Carl Coppert Aaron Babin (t)	
Branch Director				Air Attack Supervisor			
5. Resources Assigned this Period							
Strike Team/Task Force/ Resource Designator	EMT	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
ENG6 6218		06/05	Welch	4			
ENG6 E-5 Williams Wildland		06/13	Jeff Lease	3			
ENG6 E-6 Williams Wildland		06/13	Daniel Wood	3			
ENG6 E-7 Attack One		06/13	Kevin Carter	3			
ENG6 E-9 Wildland Services		06/13	Dusty Krebsbach	3			
SOFC		06/12	Michael Heard	1			
6. Control Operations/Work Assignments:"							
<ul style="list-style-type: none"> <li>Hold fire south of Loop Rd.</li> <li>Conduct visual observation of fire's edge south of Loop Rd.</li> <li>Identify any threat to park infrastructure and camps.</li> <li>Relay significant activity to DIVS and Operations.</li> </ul>							
7. Special Instructions:							
Be aware of potential safety issues and hazards when conducting operations around WUI.							
8. Division/Group Communication Summary							
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode	
Command						Digital	
Tactical	FWSTAC1	166.8250	0000	166.8250	0000	Analog	
Tactical Div/Group	BCYLCL	166.7750	0000	166.7750	0000	Analog	
Air to Ground	A/G85	168.3250	0000	168.3250	0000	Analog	
9. Prepared by (Resource Unit Leader) Carol O'Bryan - PSCC			Approved by (Planning Section Chief) /s/ Carol O'Bryan			Date 06/01/25	Time 1600

1. Incident Name:	2. Date/Time Prepared:	3. Operational Period:	
	Date:	Date From:	Date To:
	Time:	Time From:	Time To:

[illegible]

<b>ICS 205</b>	<b>IAP Page</b> _____	<b>Date/Time:</b> _____
----------------	-----------------------	-------------------------





## AIR OPERATIONS SUMMARY (ICS 220 WF)

1. Incident Name / Number			2. Date Prepared	3. Time Prepared	4. Prepared By
5. Sunrise	Sunset	Pumpkin Time	6. Shutdown	7. Operational Period - Date	8. Operational Period – Time

9. General Remarks, Safety Notes, Hazards, Air Operations Special Equipment, etc.	10. Helibase Information	11. Temp. Flight Restriction (TFR)
	Name:	NOTAM:
	Latitude:	Altitude:
	Longitude:	Frequency:
		Hours:

12. Extraction/Medevac Information			
	Medevac	Short-haul	Hoist
FAA#:			
Phone:			
Location:			
Capabilities			
Request Incident Personnel Extraction/Medevac Through:			

13. Incident Frequencies	RX	Tone	TX	Tone	AM/FM/Digital	14. Position	Name	Phone
A/A (TFR)						AOBD		
A/A Rotor						ASGS/SOFL UAM		
A/A Briefing/Handoff						HEBM (t) HEBM		
A/G 59 IA						ATGS		
A/G 85 Sandy								
A/G Assigned If Needed						UAO		
NPS DECK Oasis Helibase								
MDC Medavac Ship A/G White								

15. Equipment/Supplies

16. HELICOPTERS						
FAA #	TYPE	Make/Model	Helibase	Start	Avail.	Remarks

17. AERIAL SUPERVISION: AIR ATTACK/HELICOPTER COORDINATOR						
FAA #	Call Sign	Make/Model	Base	Start	Avail.	Remarks

18. UNMANNED AIRCRAFT SYSTEMS (UAS)							
Identifier	Cat./ Type	Make/ Model	Location	Start	Avail.	Leader/ Contact	Remarks

# SAFETY MESSAGE

**Sandy Fire**

DATE & SHIFT:  
**06/02/2025**



## Radio Communications Checks

Reminders:

**Make sure you have COMMO with the folks you are working with.**

### **BASIC INFO HERE!**

- 1) Beginning of the day – Test the radios out.
- 2) Ensure you are on the correct channel for the assigned mission – know the channels we are to be using!
- 3) Common testing/items to check are: batteries (pwr) being new at the start of the day. Test the radio with co-workers or dispatch making sure you are transmitting clear & undistorted.
- 4) When speaking into the radio – talk 2 to 3 inches away from the radio microphone doing so in a clear & normal tone of voice. DO NOT SPEAK SOFTLY AS THIS DOES MAKE IT DIFFICULT FOR THE RECEIVING FOLKS TO MAKE YOU OUT. Leaving the radio on your chest (Chest Pack) while speaking creates some problems also – make sure to turn the radio towards you when speaking if using this type. Also using the portable this way does not propagate the radio signal as well as holding the portable straight up & down & speaking into the radio.
- 5) If your radio is NOT working up to par – get another one lined up if possible!
- 6) Common causes of poorly operating units include: bad batteries or pack, poor antenna or antenna connection.
- 7) Don't handle the portable by the antenna – this often times loosens the connections internally - making the radio unusable until it is repaired.
- 8) Bottom line is – check your COMMO before every shift out there, make sure it's working!!

**BICY Safety Team**

# \$ FINANCE \$

[anna\\_lee@nps.gov](mailto:anna_lee@nps.gov)

Finance Section Chief: Anna Lee  
305-972-4909

## Check In

Upon arrival to the incident, please submit:

- RO
- Casual hire form (ADs)
- Agreement (cooperators or contractors)

## CTRs

Email CTRs at least every other day. Remember to include the following information:

- Hazard justification if applicable
- IRPP eligibility in remarks

## OF-288s

Contact Finance when you are preparing to demob to request a copy of your 288.

## Account Information

NPS: PF.FSS1L9025.00.1

USFS: PPS1L925 (1532)

## Assignment Extensions

Non-local resources requesting to extend should complete an extension form and have it signed by your incident supervisor, home unit supervisor and the IC. Submit a signed copy to Finance.



“Do (your CTRs) or do not. There is no try”  
-Master Yoda

“But please do.”  
-Anna Lee

1. Incident Name:		2. Operational Period: Date From:		Date To:
		Time From:		Time To:
3. Name:		4. ICS Position:		5. Home Agency (and Unit):
6. Resources Assigned:				
Name	ICS Position		Home Agency (and Unit)	
7. Activity Log:				
Date/Time	Notable Activities			
8. Prepared by: Name: _____ Position/Title: _____ Signature: _____				
ICS 214, Page 1		Date/Time: _____		

# MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

1. Incident/Project Name				2. Operational Period				
3. Ambulance Services								
Name	Complete Address			Phone & EMS Frequency		Advanced Life Support (ALS) Yes No		
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 Gnd		Phone	Helipad Yes No		Level of Care Facility
	Lat:							
	Lat:					<input type="checkbox"/>	<input type="checkbox"/>	
	Long:					<input type="checkbox"/>	<input type="checkbox"/>	
	VHF:					<input type="checkbox"/>	<input type="checkbox"/>	
	Lat:					<input type="checkbox"/>	<input type="checkbox"/>	
	Long:					<input type="checkbox"/>	<input type="checkbox"/>	
	VHF:					<input type="checkbox"/>	<input type="checkbox"/>	
	Lat:					<input type="checkbox"/>	<input type="checkbox"/>	
	Long:					<input type="checkbox"/>	<input type="checkbox"/>	
	VHF:					<input type="checkbox"/>	<input type="checkbox"/>	
6. Division   Branch   Group		Area Location Capability						
		EMS Responders & Capability:						
		Equipment Available on Scene:						
		Medical Emergency Channel:						
		ETA for Ambulance to Scene:						
		Air:						
		Ground:						
		Approved Helispot:						
		Lat:						
		Long:						
		EMS Responders & Capability:						
		Equipment Available on Scene:						
		Medical Emergency Channel:						
		ETA for Ambulance to Scene:						
		Air:						
		Ground:						
		Approved Helispot:						
		Lat:						
		Long:						

# 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.**

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° – 3° 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° – 3° 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		Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)
Transport Request		Air Ambulance / Short Haul/Hoist Ground Ambulance / Other
Patient Location		Descriptive Location & Lat. / Long. (WGS84)
Incident Name		Geographic Name + "Medical" (Ex: Trout Meadow Medical)
On-Scene Incident Commander		Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)
Patient Care		Name of Care Provider (Ex: EMT Smith)

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.