

# R3 FALL IA SUPPORT

NC-NCS-230037  
Fiori Time Code: G/T/F 1434

# FY24 NCFS INCIDENT SUPPORT

NC-NCS-230041  
Financial Code: PN QRN9



November 12, 2023

Operational Period Day 0700-1900 hrs.  
Operational Period Night 1900-0700 hrs.



<b>INCIDENT OBJECTIVES</b>	1. INCIDENT NAME <b>2023 R-3 Fall IA Support and FY24 NCFS Large Incident Support</b>	2. DATE PREPARED 11/11/23	3. TIME PREPARED 1700
4. OPERATIONAL PERIOD (DATE/TIME) <sup>9</sup> November 12, 2023 Day 0700-1900 / Night 1900-0700			
5. GENERAL CONTROL OBJECTIVES FOR THE INCIDENT (INCLUDE ALTERNATIVES)  <ol style="list-style-type: none"> <li>1. Provide for safety of our firefighters, assigned resources and public through adequate work rest ratios, risk assessments, hazard mitigation and information dissemination.</li> <li>2. Assist North Carolina Forest Service Mountain Region in planning, resource tracking, and financial tracking of the 2023 R3 Fall IA Support resources.</li> <li>3. Manage fires in cost effective manner. Maintain accurate cost estimates of the incident and provide daily updates through morning reports and afternoon situation reports.</li> <li>4. All incident personnel will be treated with dignity and respect. We exhibit care, concern, or consideration for others. This incident has zero tolerance for harassment, alcohol or drug use.</li> </ol>			
6. WEATHER FORECAST FOR OPERATIONAL PERIOD Districts should provide updated weather forecast to resources			
7. GENERAL SAFETY MESSAGE <b><u>HYDRATION/HEAT STRESS</u>- drink often and drink a lot, before you get thirsty. 4:1 water to sports drinks.</b>			
8. ATTACHMENTS (✓ IF ATTACHED)  <input checked="" type="checkbox"/> ORGANIZATION LIST (ICS 203) <input checked="" type="checkbox"/> MEDICAL PLAN (ICS 206) <input checked="" type="checkbox"/> SAFETY MESSAGE <input checked="" type="checkbox"/> ASSIGNMENT LIST (ICS 204) <input type="checkbox"/> INCIDENT MAP <input checked="" type="checkbox"/> PHONE LIST <input type="checkbox"/> COMMUNICATIONS PLAN (ICS 205) <input type="checkbox"/> TRAVEL MAP <input type="checkbox"/>			
9. PREPARED BY (RESOURCE UNIT LEADER) Lisa Hartrick	10. APPROVED BY (INCIDENT COMMANDER) Kevin Harvell		

ORGANIZATION ASSIGNMENT LIST		9. Operations Section	
<b>1. Incident Name</b> <b>R3 Fall IA Support</b> <b>and</b> <b>FY24 NCFS Incident Support</b>		Ops Day	David LaFon / Dwayne Vigil(t) / Brian Rogers (t)
		Ops Night	Rob Davis
		<b>a. Branch I Days</b>	
<b>2. Date</b> 11/10/23	<b>3. Time</b> 1700	Branch Director	
<b>4. Operational Period: November 12, 2023</b> <b>Day 0700-1900</b> <b>Night 1900-0700</b>		Division/Group	<b>District 1</b> Trent Duncan
		Division/Group	<b>District 2</b> Duane Truslow
		Division/Group	<b>District 9</b> Ruthie Edwards
		Division/Group	<b>District 12</b> Matt Barker
<b>5. Command and General Staff</b>		Division/Group	
Incident Commander	Kevin Harvell	Division/Group	
Deputy IC		Division/Group	
Safety Officers	Greg Riggs Chad Brandon(t)	<b>b. Branch II Night</b>	
Information Officers	Carrie McCullen / Philip Jackson	Branch Director	
		Division/Group	
Liaison Officers	Jason Guidry / James Kimes	Division/Group	
		Division/Group	
<b>6. Agency Representatives</b>		Division/Group	
Agency	Name	Division/Group	
NCFS	Michael Cheek	Division/Group	
WADNR	Todd Welker	<b>c. Branch III</b>	
		Branch Director	
		Division/Group	
<b>7. Planning Section</b>		Division/Group	
Chief	Dennis Register	Division/Group	
Deputy		Division/Group	
Resources Unit	Austin Harriett	<b>d. Branch IV</b>	
Resource Unit			
Situation Unit	Richard Cockerham	Branch Director	
Documentation	Robin Roberson	Division/Group	
Demobilization Unit	Lisa Hartrick	Division/Group	
Fire Behavior Analyst		Division/Group	
Field Observers		Division/Group	
GIS	Matthew Bishop / Matthew Haunsperger / Aaron Chamblee(t)	Division/Group	
Status Check-in	John Willis	<b>e. Other Groups</b>	
<b>8. Logistics Section</b>		UAS Group	
Chief	Jamie Logan	<b>f. Air Operations Branch</b>	
Deputy		THSP / Air OPS	Jonathan Ross
Supply Unit	Patrick Raynor	Air Attack Supervisor	
Facilities Unit	Derek Arney	Air Support Supervisor	
Ground Support Unit	Frankie Britt	Helicopter Coordinator	
Communications Unit	Jimmy Meadows Jr.	Air Tanker Coordinator	
Communication Tech	Bruce Scott	Helibase Managers	
Radio Operator		<b>10. Finance Section</b>	
Equipment Manager	Wayne Pugh	Chief	Ron Meyers / Bridgit Gallagher(t)
Ordering Manager	Jason Wade(t)	Deputy	
Food Unit	Clyde Leggins	Time Unit	
Medical Unit	Stewart Niemyer	Time Unit	Renee Strickland
Receiving & Dist		Cost Unit	Bridgit Gallagher
Security Unit		Equipment Time Recorder	Jeana McDuffie
Mechanics		Personel Time Recorder	Kristi Wilson
Driver		Compensation / Claims Unit	
		<b>Prepared by (Resource Unit Leader)</b> Austin Harriett	

<b>DIVISION ASSIGNMENT LIST</b>			1. <b>BRANCH</b>		2. Division/Group <b>District 1</b>			
3. Incident Name <b>2023 R3 Fall IA Support and FY24 NCFS Incident Support</b>			4. Operational Period Date: 11/12/23 Time: 0700-1900					
5. Operations Personnel								
Operations Chief		Division/Group Supervisor			Trent Duncan			
Branch Director								
6. Resources Assigned This Period								
Strike Team/Task Force/ Resource Designator		Leader		Last Shift	EMT	Number Persons	Trans Needed	Reporting Location
ICT4 3-61		M. Frye O-21		11/17		1		Henderson County Office
ICT4(t) 11-20		G. Johnson O-19		11/17		1		Buncombe County Office
ICT5 4-71		K. Toomer O-20		11/17		1		Buncombe County Office
ICT5 5-21		P. Pennington O-22		11/17		1		Henderson County Office
HEQB 7-4		Mike Blake O-78		11/21		1		McDowell County HQ
HEQB 8-61		Mike Davis O-79		11/21		1		Transylvanie County HQ
Ops Officer		Paul Mowrey O-67		11/20		1		D-1 HQ
7. Control Operations  <b>Assist with Initial Attack of new starts and mop up existing fires within District 1.</b>								
8. Special Instructions  <b>O-78 Blake paired with 1x2</b> <b>O-79 Davis paired with 1x3</b>								
9. Division/Group Communication Summary								
Function	Frequency	System	Channel	Function	Frequency	System	Channel	
<b>Command</b>		<b>NCFS</b>		<b>Logistics</b>		<b>NCFS</b>		
<b>Tactical Div/Group</b>		<b>NCFS</b>		<b>Air to Ground</b>		<b>NCFS</b>		
Prepared By (Resource Unit Leader) <b>Lisa Hartrick</b>			Approved By (Planning Sect. Ch.) <b>Dennis Register</b>			Date <b>11/11/23</b>		Time <b>1900</b>

<b>DIVISION ASSIGNMENT LIST</b>				<b>1. BRANCH</b>		2. Division/Group <b>District 2</b>	
3. Incident Name <b>2023 R3 Fall IA Support and FY24 NCFS Incident Support</b>				4. Operational Period  Date: 11/12/23                      Time: 0700-1900			
5. Operations Personnel							
Operations Chief				Division/Group Supervisor		Duane Truslow	
Branch Director							
6. Resources Assigned This Period							
Strike Team/Task Force/ Resource Designator	Leader	Last Shift	EMT	Number Persons	Trans Needed	Reporting Location	
ICT3 13-1	John Cook O-72	11/19		1		Elk Creek Fire Watauga Co.	
DIVS w/ICT4 8-41	Raymond "Rex" Strickland O-12	11/17		1		D2 HQ	
DIVS	George Brown O-102	11/20		1		D2 HQ	
TFLD w/ICT4 6-60	Robert "Robby" Freeman O-13	11/15		1		D2 Avery County HQ	
ICT4 3-4	Will Bell O-14	11/16		1		D2 HQ	
DIVS	Robert Hinds O-12	11/25		1		D2 HQ	
DIVS	Timothy Love O-14	11/25		1		D2 HQ	
DIVS(t)	Brett Walker O-26	11/25		1		D2 HQ	
ICT3	Walter Escobar O-17	11/25		1		D2 HQ	
TFLD	Joe Thorpe O-8	11/25		1		D2 HQ	
TFLD	Shannon Clark O-5	11/25		1		D2 HQ	
TFLD(t)	Austin Russell O-25	11/25		1		D2 HQ	
NCWRC Crew Mod	Brandon Bridges C-4	11/20		7		D2 HQ	
HC2 NC Parks	Jesse Anderson C-1000	11/21		11		D2 HQ	
HCM SE Washington	Jeffrey Delarosa O-1	11/25		11		D2 HQ	
HCM Highlands	Hunter Forthun O-2	11/25		10		D2 HQ	
Ops Officer R1-31	Billy Barnette O-15	11/17		1		D2 HQ OPS Room	
7. Control Operations <b>Assist with Initial Attack of new starts and mop up existing fires within District 2.</b>							
8. Special Instructions							
Function	Frequency	System	Channel	Function	Frequency	System	Channel
<b>Command</b>		<b>NCFS</b>		<b>Logistics</b>		<b>NCFS</b>	
<b>Tactical Div/Group</b>		<b>NCFS</b>		<b>Air to Ground</b>		<b>NCFS</b>	
Prepared By (Resource Unit Leader)		Approved By (Planning Sect. Ch.)		Date		Time	
<b>Lisa Hartrick</b>		<b>Dennis Register</b>		<b>11/11/23</b>		<b>1900</b>	

<b>DIVISION ASSIGNMENT LIST</b>		1. <b>BRANCH</b>		2. Division/Group <b>District 9</b>			
3. Incident Name <b>2023 R3 Fall IA Support and FY24 NCFS Incident Support</b>		4. Operational Period Date: 11/12/23 Time: 0700-1900					
5. Operations Personnel							
Operations Chief		Division/Group Supervisor		Ruthie Edwards			
Branch Director							
Can 6. Resources Assigned This Period							
Strike Team/Task Force/ Resource Designator	Leader	Last Shift	EMT	Number Persons	Trans Needed	Reporting Location	
ICT5 6-52	Casey Corbett O-5	11/13		1		Haywood County HQ	
FFEO 13-66	Jon van Riper O-6	11/13		1		Cherokee County HQ	
HEQB 7-24	Jack Keller O-7	11/19		1		D-9 HQ	
FFT1 13-74	Landise Cuthrell O-8	11/13		1		Cherokee County HQ	
FFT1 5-82	Justin McLemore O-9	11/13		1		Hawood County HQ	
ICT4 6-21	Blake Arnold O-75	11/21		1		Swain County HQ	
DIVS	Hoerner Thomas O-13	11/25		1		D-9 HQ	
DIVS	Joshua Mohler O-15	11/25		1		D-9 HQ	
ICT3	Gene Phillips O-18	11/25		1		D-9 HQ	
TFLD	David Westscott O-6	11/25		1		D-9 HQ	
TFLD	Anthony Dobson O-7	11/25		1		D-9 HQ	
TFLD	Jana Peterson O-20	11/25		1		D-9 HQ	
HCM Thunder Mountain	Janik Sundberg O-19	11/25		12		D-9 HQ	
7. Control Operations  <b>Assist with Initial Attack of new starts and mop up existing fires within the District 9.</b>							
8. Special Instructions							
9. Division/Group Communication Summary							
Function	Frequency	System	Channel	Function	Frequency	System	Channel
<b>Command</b>		<b>NCFS</b>		<b>Logistics</b>		<b>NCFS</b>	
<b>Tactical Div/Group</b>		<b>NCFS</b>		<b>Air to Ground</b>		<b>NCFS</b>	
Prepared By (Resource Unit Leader) <b>Lisa Hartrick</b>		Approved By (Planning Sect. Ch.) <b>Dennis Register</b>			Date <b>11/11/23</b>	Time <b>1900</b>	



## Ordering, Check-in, Demob, and Finance Procedures

- **Resources that were ordered through the FY24 NCFS Incident Support:**
  - **Will check-in with the Harvell IMTC at the Justice Academy**
  - **Will demob with the Harvell IMTC at the Justice Academy**
- Districts will call Region 3 and ask for Severity Ordering to place all resource and supply orders.
  - Severity ORDM will generate Request Number and will submit through expanded/R3 to go up to CO
- Assigned resources will travel to the District that ordered them.
- Upon arrival, resources ordered through **R3 Fall IA Support** will complete the following:
  - NC-211 NCFS Check-in Sheet and email, along with Resource Orders to [ncfs.imt.plans@ncagr.gov](mailto:ncfs.imt.plans@ncagr.gov)
  - District Mechanics and/or FFEs will perform an equipment inspection on all equipment on the OF-296 Inspection form and email a copy to [frankie.britt@ncagr.gov](mailto:frankie.britt@ncagr.gov)
  - **Out-of-State resources will check-in at the Justice Academy.**
- All resources being released from a fire will need to be submitted to R3 Ops for reassignment/area of staging.
  - District Ops should update Severity Resources daily by emailing [ncfs.imt.plans@ncagr.gov](mailto:ncfs.imt.plans@ncagr.gov) daily by 1000 hours.
- **LODGING**
  - District Office will arrange lodging as needed for resources.
  - District Office Manager will add information to lodging tracking spreadsheet daily.
  - Rooms will be paid for by Buying Team.
  - Resources will CHECK OUT from the hotel when they leave but are not responsible for invoices.
- **SUPPLIES**
  - Severity ORDM will generate S# for supplies and submit to Buying Team for fulfillment.
  - Supply orders will be filled by a local BUYM who is assigned to the Buying Team.
  - BUYM will deliver all documentation related to purchases to the Buying Team.



- Finance
  - Submit CTRs and Shift Tickets Daily
  - See attached document for daily procedures
  - Paid-out costs will be submitted daily to CO-Ops by IMT Finance
  
- Resources that are preparing to demob from the District or a large fire (including out-of-state resources) should notify Demob Unit Leader Lisa Hartrick and Finance 3 days prior to their scheduled demob date.
  - 1<sup>st</sup> working day is the day following travel to the incident/assigned district, regardless of distance traveled.
  - Unless an extension is granted through the proper channels, resources will have a 14-day assignment.
  - Resources will be required to RON on their last working day and travel home the next day, unless their home is within 2-hours driving time from assigned District Office.
  - The Demob Unit Leader will email the resource the ICS 221, Demobilization Check out form.
    - A District representative will sign off on Facilities, Ground Support, and Supply; indicating that they have checked out of hotels, had their equipment inspected, and returned any supplies issued by the District.
    - A District representative will indicate an ETD from the District and an ETA to their home unit.
    - **Out-of-State resources will travel to the Justice Academy to demob.**
  - The following documents will be emailed to [ncfs.imt.plans@ncagr.gov](mailto:ncfs.imt.plans@ncagr.gov)
    - ICS 221, Demobilization Check out form
    - A copy of the evaluation for the resource
  - The following documents will be emailed to [ncfs.imt.finance@ncagr.gov](mailto:ncfs.imt.finance@ncagr.gov)
    - All remaining CTRs and Equipment Shift Tickets
    - Completed Equipment inspection forms, OF-296
  - Finance will email the resource their final documentation package.

# Finance Information for Districts and Resources

## Submit CTRs and Shift Tickets **DAILY**

Paper copies can be left at the district office to be picked up by a team member or emailed to:

[ncfs.imt.finance@ncagr.gov](mailto:ncfs.imt.finance@ncagr.gov)

- Include the **Fire Name** and **District** you are assigned to in the remarks section of all CTRs and STs.
- Include dollar amount of fuel purchased in **Box 14 Remarks** on the shift ticket.
- Please show travel time on your documents and include **TRAVEL** in remarks. You only have travel on your first and last day.
- Legibly complete your CTRs and Equipment Shift Tickets using the examples below.
- Make sure you use your legal name (not a nickname) on ALL documentation.
- Only one day per CTR/Equipment Shift Ticket.
- **Make sure your incident supervisor signs your tickets before submitting them to finance.**

### 2023 R-3 Fall IA Support, NC-NCS-230037 Examples

CREW TIME REPORT						
(1) CREW NAME			(2) CREW NUMBER			
NCFS			O-25			
(3) OFFICE RESPONSIBLE FOR FIRE		(4) FIRE NAME		(5) FIRE NUMBER		
NCFS		2023 R-3 FALL IA Support		NC-NCS-230037		
(6) RE-MARKS NO.	(7) NAME OF EMPLOYEE	(8) CLASSIFICATION	(9) DATE		(10) DATE	
			11/10/2023		DATE	
T	Chester VonWiggins	DIVS	Military Time		Military Time	
			ON	OFF	ON	OFF
			0700	1130		
			1200	1900		
(11) REMARKS						
T = Travel						
Fire Name						
District you are working in						
(12) OFFICER-IN-CHARGE (Signature)			(13) TITLE (Officer-in-Charge)		(15) DATE	
Bridgit Gallagher			FSCC(T)		11/11/23	
(14) NAME (Person Posting to Emergency Time Report)						

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-25					
1. AGREEMENT NUMBER			2. CONTRACTOR (name)		
3. INCIDENT OR PROJECT NAME			4. INCIDENT NUMBER		
2023 R-3 Fall IA Support			NC-NCS-230037		
5. OPERATOR (name)		6. EQUIPMENT MAKE		7. EQUIPMENT MODEL	
VonWiggins, Chester		Ford		F-150	
8. OPERATOR FURNISHED BY		9. SERIAL NUMBER		10. LICENSE NUMBER	
<input checked="" type="checkbox"/> CONTRACTOR <input type="checkbox"/> GOVERNMENT		last 5 of VIN #		PP-1234	
11. OPERATING SUPPLIES FURNISHED BY		12. DATE			
<input checked="" type="checkbox"/> CONTRACTOR (wet) <input type="checkbox"/> GOVERNMENT (dry)		MO/DAY/YR			
14. REMARKS (released, down time and cause, problems, etc.)		13. EQUIPMENT USE			
T=Travel Rate=\$32.00 Fire Name District you are working in		HOURS/DAYS/MILES(circle one)			
15. EQUIPMENT STATUS		START			
<input type="checkbox"/> a. Inspected and under agreement		STOP			
<input type="checkbox"/> b. Released by Government		WORK			
<input type="checkbox"/> c. Withdrawn by Contractor		SPECIAL			
16. INVOICE POSTED BY (Recorder's initials)		17. CONTRACTOR'S OR AUTHORIZED AGENT'S SIGNATURE			
		Chester VonWiggins			
		18. GOVERNMENT OFFICER'S SIGNATURE		19. DATE SIGNED	
		Bridgit Gallagher		11/11/23	
NSN 7540-01-119-562850297-102					
OPTIONAL FORM 297 (Rev. 7-90) USDA/USDI					

### 2024 NCFS Incident Support, NC-NCS-230041 Examples (All Out-of-State Resources only)

CREW TIME REPORT						
(1) CREW NAME			(2) CREW NUMBER			
NCFS			O-25			
(3) OFFICE RESPONSIBLE FOR FIRE		(4) FIRE NAME		(5) FIRE NUMBER		
NCFS		2024 NCFS Large Inc Supp		NC-NCS-230041		
(6) RE-MARKS NO.	(7) NAME OF EMPLOYEE	(8) CLASSIFICATION	(9) DATE		(10) DATE	
			11/10/2023		DATE	
T	Chester VonWiggins	DIVS	Military Time		Military Time	
			ON	OFF	ON	OFF
			0700	1130		
			1200	1900		
(11) REMARKS						
T = Travel						
Fire Name						
District you are working in						
(12) OFFICER-IN-CHARGE (Signature)			(13) TITLE (Officer-in-Charge)		(15) DATE	
Bridgit Gallagher			FSCC(T)		11/11/23	
(14) NAME (Person Posting to Emergency Time Report)						

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-25					
1. AGREEMENT NUMBER			2. CONTRACTOR (name)		
3. INCIDENT OR PROJECT NAME			4. INCIDENT NUMBER		
2024 NCFS Large Incident Support			NC-NCS-230041		
5. OPERATOR (name)		6. EQUIPMENT MAKE		7. EQUIPMENT MODEL	
VonWiggins, Chester		Ford		F-150	
8. OPERATOR FURNISHED BY		9. SERIAL NUMBER		10. LICENSE NUMBER	
<input checked="" type="checkbox"/> CONTRACTOR <input type="checkbox"/> GOVERNMENT		last 5 of VIN #		PP-1234	
11. OPERATING SUPPLIES FURNISHED BY		12. DATE			
<input checked="" type="checkbox"/> CONTRACTOR (wet) <input type="checkbox"/> GOVERNMENT (dry)		MO/DAY/YR			
14. REMARKS (released, down time and cause, problems, etc.)		13. EQUIPMENT USE			
T=Travel Rate=\$32.00 Fire Name District you are working in		HOURS/DAYS/MILES(circle one)			
15. EQUIPMENT STATUS		START			
<input type="checkbox"/> a. Inspected and under agreement		STOP			
<input type="checkbox"/> b. Released by Government		WORK			
<input type="checkbox"/> c. Withdrawn by Contractor		SPECIAL			
16. INVOICE POSTED BY (Recorder's initials)		17. CONTRACTOR'S OR AUTHORIZED AGENT'S SIGNATURE			
		Chester VonWiggins			
		18. GOVERNMENT OFFICER'S SIGNATURE		19. DATE SIGNED	
		Bridgit Gallagher		11/11/23	
NSN 7540-01-119-562850297-102					
OPTIONAL FORM 297 (Rev. 7-90) USDA/USDI					

\*Resource is responsible for turning in all documentation to finance

\*\*Any finance questions can be emailed to [ncfs.imt.finance@ncagr.gov](mailto:ncfs.imt.finance@ncagr.gov)

**(NC-211A, 9/21/2023) NCFS Incident Check-In-Sheet**

Incident Name: \_\_\_\_\_

**Instructions Section 1:** Single Resources, Crew Boss, Strike Team Leaders, & Task Force Leaders fill in blanks and appropriate check boxes. Place Crews, Strike Teams, or Task Force personnel and equipment on back manifest only.

Incident #: \_\_\_\_\_

Request #: \_\_\_\_\_ Contracted Resource? Yes No AD

Assignment (Kind/Position): \_\_\_\_\_ Trainee: Y N  
Task Book: Y N

Name (Last, First): \_\_\_\_\_

Trainee: Y N

Name of Crew/ST/TF: \_\_\_\_\_

Task Book: Y N

Agency Name: \_\_\_\_\_

Other Qualifications: \_\_\_\_\_

Resource Type: Single Resource Strike Team Task Force Total # of Personnel: \_\_\_\_\_

Task Book: Y N

Check-in Date: \_\_\_\_\_ Check-in Time: \_\_\_\_\_

Task Book: Y N

Unit ID: \_\_\_\_\_ Call Sign: \_\_\_\_\_

Task Book: Y N

Demob NCFS Unit: \_\_\_\_\_  
(Region, District, County)

Mobilization Date: \_\_\_\_\_

Demob City: \_\_\_\_\_ Demob State: \_\_\_\_\_

Last Day Off: \_\_\_\_\_

Jetport (if flying): Departure: \_\_\_\_\_ Arrival: \_\_\_\_\_ DOB: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Travel Method: Air/Rental Air AOV Bus Passenger POV

Pager Number: \_\_\_\_\_

Rental Company: \_\_\_\_\_ Make/Model/Yr: \_\_\_\_\_ Tag#/St: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

City St Zip

For Plans Use Only:	Posted	T-Card	Red Card
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**Instructions Section 2:** Provide Call Sign, Tag # and/or Serial # for all applicable equipment

VEHICLE (Transportation)	CALL SIGN/TAG#	Check one	TPL-TRACTOR PLOW	DZR-DOZER	CALL SIGN
AUTO-Car/Sedan	_____	Type 1 (Komatsu DP65, TD-15C, TD-15E, TD-15F)	_____	_____	_____
PUP1-Pickup Type 1 (ex. F-350)	_____	Type 2 (D6D, 1450 Case, Fiat 10, D5H, TD-12, TD-12XP, JD750C)	_____	_____	_____
PUP2-Pickup Type 2 (ex. F-250)	_____	Type 3 (1150 Case B, 1150 Case E, JD700)	_____	_____	_____
PUP3-Pickup Type 3 (ex. F-150)	_____	Type 4 (TD-9, D4H, D5C, Fiat 8, JD650, Leibher 711, 850 Case)	_____	_____	_____
RADV-Radio Engineer Vehicle	_____	Type 5 (TD-8, JD450)	_____	_____	_____
SUVL-Sport Utility Vehicle	_____	Type 6 (TD-6, JD350, D-3)	_____	_____	_____
VANP-Passenger Van	_____	<b>HEAVY EQUIPMENT</b>	<b>CALL SIGN/TAG#</b>	<b>PUMPS - MBLP</b>	<b>SERIAL#</b>
VATV-All Terrain Vehicle	_____	BHOE-Backhoe	_____	Portable (Mark III)	_____
VUTV-Utility Terrain Vehicle	_____	EXCA-Excavator, Type Any	_____	4"-6" Discharge	_____
<b>TRUCKS</b>	<b>CALL SIGN/TAG#</b>	FORK-Forklift (_____ lb)	_____	Volume Lift	_____
LOWB-Lowboy/Hauling Unit	_____	FTRA-Farm Tractor (_____ hp)	_____	Volume Lift + Farm Tractor	_____
STK-Stakeside, Type Any	_____	GRD-Road Grader	_____	<b>AIRCRAFT</b>	<b>NCFS#/TAIL#</b>
STML-Mechanic Truck, Light (F-350)	_____	LDFR-Front End Loader	_____	AOSU-Air Ops Cmd. Trailer	_____
STMH-Mechanic Truck, Heavy (F-450)	_____	TDMP-Dump Truck	_____	ATS3-SEAT (AT802F)	_____
VBOX-Box Truck, (_____ Duty)	_____	<b>MISC EQUIP</b>	<b>CALL SIGN/TAG#/SERIAL#</b>	FWAA-Cessna 182	_____
<b>ENGINE - ENG</b>	<b>CALL SIGN/TAG#</b>	CS-Chainsaw	_____	FWAA-Cessna 185	_____
Type 1-1000+ GPM (300+ gal)	_____	EBAM-E-BAM	_____	FWAA-Cessna 206	_____
Type 2-500+ GPM (300+ gal)	_____	FT-Fuel Tender	_____	FWCA-Kodiak 100	_____
Type 3-150 GPM (500-1500 gal)	_____	GENR-Generator (_____ KW)	_____	FWLP-T-34 Lead Plane	_____
Type 4-50 GPM (750-1500 gal)	_____	OFFT-Mobile Office (_____ ft)	_____	HEL2-UH-1H IA	_____
Type 5-50 GPM (400-749 gal)	_____	PTBD-Portal Bridge/Bridge Truck	_____	HEL4-UH-1H+ IA	_____
Type 6-50 GPM (150-399 gal)	_____	RAWP-Mobile RAWS	_____	HEL3-AS350-B3 Trans IA	_____
Type 7-10 GPM (50-200 gal)	_____	RGTR-Rain Gun Trailer	_____	HOSU-Helio Ops Support Unit	_____
<b>TRACK VEHICLES</b>	<b>CALL SIGN/SERIAL#</b>	TBOT-Boat	_____	MRBM-Mobile Retardant Base	_____
SKDS-Fire Track	_____	TRAT-Tractor/Trailer	_____	UAR2-Unmanned Rotor Wing Type 2	_____
SKGS-Nodwell/Flex Track/Softtrack	_____	TRLR-Trailer	_____	UAR4-Unmanned Rotor Wing Type 4	_____
<b>WATERTENDER</b>	<b>CALL SIGN/TAG#</b>	<b>OTHER EQUIP</b>	<b>UNIT ID</b>	<b>OTHER EQUIP</b>	<b>UNIT ID</b>
WAT-Water Tender, All Sizes	_____	_____	_____	_____	_____

(NC-211A, 9/21/2023) **NCFS Incident Manifest Sheet**

**Instructions:** Crews, Strike Teams, Task Force, or Groups fill in blanks. Reference equipment types on Check-in Sheet (NC-211A) to complete manifest.

Request #: \_\_\_\_\_

Incident Name: \_\_\_\_\_

Unit Name: \_\_\_\_\_

Leaders Name: \_\_\_\_\_

**PERSONNEL**

#	Name (Last, First)	Position Code	Call Sign	Home Unit	Home City	Last Day Off
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

**EQUIPMENT**

#	Kind Code	Equipment Description (Call Sign & Make/Model)	Tag #, Tail # or Serial #	Operator's Name (Last, First)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				



# 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"/> <b>RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE</b> <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2<sup>o</sup> – 3<sup>o</sup> burns more than 4 palm sizes, heat stroke, disoriented.</i> <input type="checkbox"/> <b>YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary.</b> <i>Ex: Significant trauma, unable to walk, 2<sup>o</sup> – 3<sup>o</sup> burns not more than 1-3 palm sizes.</i> <input type="checkbox"/> <b>GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport</b> <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>
Evacuation Request		<i>Air Ambulance / Short Haul/Hoist Ground Ambulance / Other</i>
Patient Location		<i>Descriptive Location &amp; 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. EVACUATION 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 ETAs of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.



