

*** CORRECTED ***

COLD INCIDENT

16 LNU 007135

INCIDENT ACTION PLAN



OPERATIONAL PERIOD

8/7/2016 0700

to

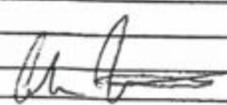
8/8/2016 0700



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: <p style="text-align: center;">COLD</p>	2. Operational Period <table style="width: 100%; border: none;"> <tr> <td style="border: none;">Date From:</td> <td style="border: none;">8/7/2016</td> <td style="border: none;">Date To:</td> <td style="border: none;">8/8/2016</td> </tr> <tr> <td style="border: none;">Time From:</td> <td style="border: none;">0700</td> <td style="border: none;">Time To:</td> <td style="border: none;">0700</td> </tr> </table>	Date From:	8/7/2016	Date To:	8/8/2016	Time From:	0700	Time To:	0700												
Date From:	8/7/2016	Date To:	8/8/2016																		
Time From:	0700	Time To:	0700																		
3. Objective(s): <u>Management Objectives</u> <ul style="list-style-type: none"> -Provide for emergency personnel and public safety at all times -Protect property, improvements and infrastructure -Foster and maintain relationships with all cooperators and stakeholders -Protect economic, natural, cultural and heritage resources -Ensure coordinated, timely and accurate release of public information -Maintain fiscal accountability and keep costs commensurate with values at risk <u>Control Objectives</u> <ul style="list-style-type: none"> -Keep the fire East of Lake Berryessa -Keep the fire South of Enos Creek -Keep the fire West of Grapevine Spring -Keep the fire North of Hwy 128 																					
General Situational Awareness: <p>Steep and rugged terrain, critically dry and receptive fuel beds, active area for fire history, drought stressed trees, and Highway 128 is open to all traffic with no controls.</p>																					
5. Site Safety Plan Required? Yes ___ No <u>X</u> Approved Site Safety Plan(s) Located at:																					
6. Incident Action Plan <table style="width: 100%; border: none;"> <tr> <td style="border: none;">X ICS 203</td> <td style="border: none;">X ICS 208</td> <td style="border: none;">X Phone List</td> <td style="border: none;">X Fire Suppression Repair Plan</td> </tr> <tr> <td style="border: none;">X ICS 204</td> <td style="border: none;">X ICS 215A</td> <td style="border: none;">X Training Message</td> <td style="border: none;">X Off Site Lodging Message</td> </tr> <tr> <td style="border: none;">X ICS 205</td> <td style="border: none;">X Travel Map</td> <td style="border: none;">X Base Map</td> <td style="border: none;">X Documentation Message</td> </tr> <tr> <td style="border: none;">X ICS 220</td> <td style="border: none;">X Weather Forecast</td> <td style="border: none;">X Demob Plan</td> <td style="border: none;">X ICS 214</td> </tr> <tr> <td style="border: none;">X ICS 206</td> <td style="border: none;">X Fire Behavior</td> <td style="border: none;">X Finance Message</td> <td></td> </tr> </table>		X ICS 203	X ICS 208	X Phone List	X Fire Suppression Repair Plan	X ICS 204	X ICS 215A	X Training Message	X Off Site Lodging Message	X ICS 205	X Travel Map	X Base Map	X Documentation Message	X ICS 220	X Weather Forecast	X Demob Plan	X ICS 214	X ICS 206	X Fire Behavior	X Finance Message	
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X ICS 206	X Fire Behavior	X Finance Message																			
7. Prepared By: Adam Mitchell	Position/Title: PSC Signature: 																				
8. Approved by Incident Commander Brian Estes	Signature: 																				
ICS 202	IAP Page ____																				

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: COLD		2. Operational Period: Date From: 8/7/2016 Time From: 0700		Date To: 8/8/2016 Time To: 0700	
3. Incident Commander(s) and Command Staff:			7. Operation Section:		
IC/UC's	Brian Estes	Chief	Mike Webb		
Deputy	Jeff Veik	Deputy	Jim Ferguson / Tim Ernst (T)		
Safety Officer	Joe Buchmeier / Josh Janssen (T)	Night Ops	Silvio Lanzas		
Information Officer	Jonathon Cox	Staging Area	Mike Riggle		
Liaison Officer	Mitch Villalpando / Michael Hardy (T)	Branch I	Director:	Scott Lindgren	
LE Liaison Officer	Scott McCartney, Steven White	Division/Group	A/D	Stevie Long	
		Division/Group	M	Kevin Wegener, Paul Lohan (T)	
		Division/Group			
4. Agency/Organization Representatives:			Division/Group		
Agency/Organization	Name	Division/Group			
CAL OES	Ken Hood	Division/Group			
ARC	Sandy Timmons	Branch V	Director:	Ron Roberts	
BLM	Jeff Tunnell	Division/Group	R	Justin Benguerel, Jerry Sean (T)	
LACO Fire Dept	Tom Stukey	Division/Group	W/X	Craig Konklin	
Yolo Co. SO	Hernan Oviedo / Dean Nyland	Division/Group			
CHP	Chuck King	Division/Group			
CAL TRANS	Franco Bargagliotti	Division/Group			
PGE	Chad Lavezzo / Dave Ebbert	Branch		Director:	
Bureau of Reclamation	Margaret Bailey	Division/Group	Supp/Repair	Megan Scheeline	
CDCR	Lt. Sid Turner	Division/Group			
City of Winters	John Donlevy, Jr.	Division/Group			
Yolo Co. OES	Dana Carey	Division/Group			
CCC	Amy Duncan / Noah Wall-Torres	Division/Group			
		Branch		Director:	
		Division/Group			
		Division/Group			
5. Planning Section:			Division/Group		
Chief	Chris Post	Division/Group			
Deputy	Adam Mitchell / David Shy	Division/Group			
Resource Unit	Gabe Garcia / Chad Wilson / <i>Jim Irving</i>	Branch		Director:	
Situation Unit	Shane Sherwood	Division/Group			
Documentation Unit	Susan Hudson	Division/Group			
Demobilization Unit	Tom Shevenell	Division/Group			
GISS	Tom Knecht	Division/Group			
FBAN	Steve Volmer / Troy Velin (T)	Division/Group			
IMET	Jason Clapp	Air Operations Branch		Director:	Scott Packwood
6. Logistics Section			Division/Group	Air Support	Tom Swanson
Chief	Eddy Moore		Helibase Manager	Scott Corn	
Deputy	Milford Ferguson				
Supply Unit	Paul Lee	8. Finance/Administration Section:			
Facilities Unit	Steve Dohman / Travis Heard	Chief	Harper Keene		
Ground Support Unit	Jason Warden	Deputy	John Kiszka		
Hired Equipment Tech	Jason Luckenbach	Time Unit	Andrew Corpuz / Juan Navarro (T)		
Communications Unit	Tim Maquire	Procurement Unit	Julie Freeman		
Medical Unit	Jorge Segura / Jamie Smart (T)	Comp/Claims Unit	Joe Tapia		
		Cost Unit	Greg Belk		
Prepared By: Name:	Adam Mitchell	PSC	Signature:		
ICS 203	IAP Page _____	Date/Time:	8/6/2016 2300 hours		



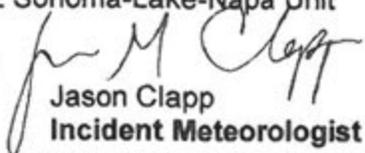
INCIDENT WEATHER FORECAST



FORECAST NO: 3
PREDICTION FOR: Sunday DAY/NIGHT SHIFT

INCIDENT NAME: Cold Fire
UNIT: CALFIRE Sonoma-Lake-Napa Unit

SHIFT DATE: 7/8 August 2016 0700-0700
TIME AND DATE
FORECAST ISSUED: 2100 / 6 August 2016

SIGNED: 
Jason Clapp
Incident Meteorologist

WEATHER TODAY:

WEATHER: Mostly cloudy on SW edge with morning stratus, otherwise sunny. Warmer and drier with late afternoon and evening breezy ridge winds. Expect wind eddies in upper Putah Creek drainage and mid to upper slopes on western side of fire.

TEMPERATURES: 85-90 *Trend: Up 1 - 3*
RELATIVE HUMIDITY: 28-33% *Trend: Down 2 - 4 %*

20 FT WINDS:

RIDGETOP – NW 3-7 mph in the morning shifting SSE 4-7 mph gusting 12 mph by 1100, then SSW increasing 7-10 mph gusting to 17 mph (1800-2300).

SLOPE/VALLEY – SE 3-7 mph in aligned canyons by mid-morning, then upcanyon gusts 15 mph in afternoon with eddying winds on mid to upper slopes.

Haines: 4 **LAL:** 1 **Stability/Inversion:** Inversion breaking around 1100.

WEATHER FOR TONIGHT AFTER 2200: Clear.

Low temperatures: 50-56...thermal belt 60-65. Max RH: 60-70%...50% midslopes.
20FT Winds: W 5-10 mph gusting 15-20 in Putah Creek drainage through 0200, then weakening.

WEATHER DISCUSSION: The upper disturbance moves east today with increased stability and slightly less wind. Temperatures warm as weak ridging builds. Monday and Tuesday will be slightly warmer and drier with some drier northerly morning ridge winds, turning SSW and breezy by late afternoon.

OUTLOOK FOR MONDAY/TUESDAY:

Monday: Temps remain near normal with decreasing humidity.

High temps: 86-91. Max/ Min RH: 60% / 25%. Winds: Slope winds with light NE ridge winds into mid-morning shifting to SSW winds 10-12 gusting 20 mph late afternoon to 2200. W 7-10 mph gusting 20 down Putah Creek Canyon 2100-0200.

Tuesday: Temps remain near normal with decreasing humidity and NE morning winds.

High temps: 86-91. Max/ Min RH: 50% / 23%. Winds: Slope winds with stronger NE ridge winds throughout morning shifting to SSW winds 7-10 gusting 20 mph late afternoon to 2200. W 6-8 mph gusting 20 down Putah Creek Canyon 2100-0200.



Nearby Weather Observations



Extended Weather Outlook

FIRE BEHAVIOR FORECAST

FORECAST NUMBER: 3	TYPE OF FIRE: Wildland Fire
FIRE NAME: Cold	OPERATIONAL PERIOD: 8/7 24hr (0700-0700)
DATE ISSUED: 08/06	TIME ISSUED: 2100
UNIT: LNU	SIGNED: 
	Printed: Troy Velin / Stephen Volmer

INPUTS

WEATHER SUMMARY

MAX Temp: 85 - 90 deg. **Min Relative Humidity:** 28% - 33%

20-Foot Winds:

Slope/Valley – SE 3 – 7 mph in aligned canyons. 5-8 mph Gusts to 15 after lunch.

Ridge top – NW 3-7 mph in early morning, becoming SE 4-7 mph with gusts to 12 by 1100, switching again to SW 8-10 with gusts 15-20 beginning in the evening through early morning tomorrow.

OUTPUTS

FIRE BEHAVIOR

GENERAL:

Critically dry and abundant fuels exist in and surrounding the fire area. The primary carrier of any new fire will be grass. By 1500hrs expect these fuel moistures to be 3-5% on west aspects and 4-6% on east aspects. Brush fuel moistures in the area are between 60% - 70% and should be expected to pose challenges to suppression. Expect spotting distances as far out at 1/3rd of a mile. Fuels North of the fire consist of dense brush 6-10' tall. These fuels have not burned in over 30 years.

New Fire Potential With Optimal Alignment

Fuel Type	ROS (Ft-MIN) Forward	FL (Ft)	PIG
Grass	Slow/Moderate 30-35	4-6	88%
Brush	Slow/Moderate 52-55	15-20	88%

SPECIFIC:

All Divisions;

Smokes are well interior on all divisions, low fire behavior expected today on the Cold Fire.

Trees falling onto or near stump holes will continue to add mop up challenges, particularly in deep drainages.

AIR OPERATIONS:

Expect inversion to lift around 1100hrs, clear and sunny.

SAFETY

Stay alert; tragedies have occurred during mop-up.

Post fire hazards are present - hot ash pits, weakened heavy limbs on oaks and pines and footing hazards. Terrain and fuels make escape to safety zones difficult



SAFETY MESSAGE COLD INCIDENT



1. Incident Name: Cold

2. Operational Period: Date From: 08/07/16
Time From: 07:00

Date To: 08/08/16
Time To: 07:00

"IN SOME CASES, TRAGEDIES OCCUR IN THE MOPUP STAGE"

- Drought stressed trees and stump holes are still a big problem. Maintain Situational Awareness and brief your personnel on these hazards.
- Be alert to bees in multiple areas of the fire line. If you have a known allergy ensure your supervisor is aware and have a plan to mitigate it.
- The use of PPE can prevent a simple injury that has a larger effect on the operation.
- Be mindful of securing your vehicles and equipment while off site. Be alert of your surroundings at all times. When possible, park in well-lit areas.
- Demobilization has begun. Please ensure you complete your golden circle prior to driving. Two minutes spent ensuring the vehicle is ready to move can prevent an accident.
- No PPE is allowed in the eating areas. Wash hands regularly and always before entering the eating areas.
- Be cognizant of fatigue in yourself and your crews. Many of us have been on multiple assignments concurrently. Rest when appropriate.
- Drive with head lights on and slow down to 5mph inside Base Camp. Be aware of pedestrian traffic inside Pena Adobe Region Park.
- Units working on Hwy 128 must use code three lights while parked. Be aware that Hwy 128 has been fully opened and will have a heavier amount of traffic due to the weekend.

IT'S NOT OVER UNTIL IT'S OVER

4. Site Safety Plan Required? Yes No

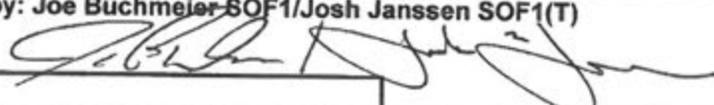
Approved Site Safety Plan(s) Located At: N/A

5. Prepared by: Name: Buchmeier/Janssen_Position/Title: _SOF1/SOF1(T)_Signature: 

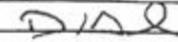
ICS 208

IAP Page _____

Date/Time: August 6, 2016/16:00

1. Incident Name: COLD		2. Incident Number: CALNU007135
3. Date/Time Prepared: Date: 8/6/16 Time: 1600		4. Operational Period: Date From: 8/7/16 Date To: 8/8/16 Time From: 0700 Time To: 0700
5. Incident Area	6. Hazards/Risks	7. Mitigations
ALL	STEEP TERRAIN	- POST LOOKOUTS - WATCH FOOTING - ADJUST OPERATIONS
ALL	NARROW ONE WAY ROADS	- HEADLIGHTS ON - SLOW DOWN
ALL	FATIGUE	- MAINTAIN PROPER WORK REST CYCLES DOCUMENT IN ICS 214
ALL	HYDRATION	- MAINTAIN 3 WATER TO 1 ELECTROLYTE RATIO
ALL	CRITICAL FUEL MOISTURES	- PAY CLOSE ATTENTION TO FIRE BEHAVIOR AND CHANGING CONDITIONS
ALL	IN CAMP CIVILIAN PEDESTRIAN TRAFFIC	- DIVERTING PEDESTRIAN TRAFFIC OFF PAVED ROADWAY - MAINTAIN FIVE MPH SPEED LIMIT IN CAMP
ALL	AVIATION HAZARDS	- MONITOR AIR TO GROUND
ALL	HIRED EQUIPMENT	- PROVIDE PROPER SUPERVISION PER CAL FIRE POLICY
ALL	IA SUPPORT TO NEW INCIDENTS	- USE RESPONSE PLAN
ALL	DROUGHT STRESSED TREES	- MAINTAIN SITUATIONAL AWARENESS
ALL	COMMUNICATIONS	- FOLLOW THE COMM PLAN - BE SURE TO CLONE RADIOS
BASE	SECURITY IN INCIDENT BASE	- PLACE SECURITY AT ENTRANCE AND EXIT PLUS TWO ROAMING ICP
8. Prepared by: Joe Buchmeier SOF1/Josh Janssen SOF1(T)		
		
ICS 215A		

ASSIGNMENT LIST (ICS 204)

1. Incident Name: COLD		2. Operational Period: Date From: 08/07/16 Date To: 08/08/16 Time From: 0700 Time To: 0700				3. Branch: Division/Group: Supp/Repair 1 of 2 Staging Area:	
4. Operations Personnel: <u>Name</u> <u>Contact #</u> Operations Section Chief: Mike Webb Night Ops: Silvio Lanzas Branch Director: Division/Group Supervisor: Megan Scheeline							
5. Resources Assigned:							
Resource Identifier	Leader	Number of Personnel	Contact (phone, radio freq, etc.)	Reporting Location, Special Equipment, Remarks, Notes, and Information			
CRW WIF Santima River*	McDowell, Aaron M	18		0700-1900	ICP		
DOZ PVT E-22*	Dunlap, David	1 2		0700-1900	ICP		
DOZ PVT E-95*	Petersen, Ryan	1		0700-1900	ICP		
DOZ PVT E-52*	Schnetzer, Darren	1		0700-1900	ICP		
DOZ PVT E-53*	Arias, Louie	1		0700-1900	ICP		
DOZ PVT E-26*	Greish, Joel	1		0700-1900	ICP		
DOZ PVT E-25*	Martinez, Aurelio	1		0700-1900	ICP		
W/T WOF WT7*	Guse, Jon	1		0700-1900	ICP		
W/T MDS 17*	Green, Paul	1		0700-1900	ICP		
W/T PVT E-142*	Andrews, Don	1		0700-1900	ICP		
W/T*		1		0700-1900	ICP		
HEQB O-31*	Drummond, James	1		0700-1900	ICP		
HEQB O-41*	Nelson, Jon	1		0700-1900	ICP		
HEQB O-30*	Tanner, Robert	1		0700-1900	ICP		
HEQB O-43*	Dyer, Jason	1 33		0700-1900	ICP		
6. Work Assignments: Repair damage caused directly from fire suppression activities							
7. Special Instructions: <u>* Entire group is 12 hour</u>							
8. Communications (radio and/or phone contact numbers needed for this assignment):							
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
CDF C11	1	COMMAND	151.1675	103.5	159.3975	162.2	
CDF T30	5	TACTICAL	151.3925	192.8	151.3925	192.8	
CALCORD	14	MEDICAL	156.0750	156.7	156.0750	156.7	
A/G	15	AIR TO GROUND	159.2250	192.8	159.2250	192.8	
GUARD 04	16	EMERGENCY	168.6250		168.6250	110.9	
9. Prepared by: Name: Dave Scheurich		Pos/Title: RESL		Signature: 			
ICS 204	IAP Page _____	Date/Time: 8/6/2016	2300 hours				

ICS 205 - INCIDENT RADIO COMMUNICATIONS PLAN

1. Incident Name: COLD		2. Date/Time Prepared Date: 08/06/2016 Time: 1800		3. Operational Period: Date From: 08/07/16 Time From: 0700 Date To: 08/08/16 Time To: 0700				
4. Communications								
Ch#	Function	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
1	COMMAND	CDF C11	COMMAND	151.1675	103.5	159.3975	162.2	GROUP 20 CH.19 (TONE 15)
2		CH 2						
3	COMMAND	NIFC T5	IN CAMP COMMAND	166.7250	CSQ	166.7250		LINKED TO CDF C11
4	TACTICAL	CDF T29	DIV A / D	151.3475	192.8	151.3475	192.8	
5	TACTICAL	CDF T30	SUPPRESSION REPAIR	151.3925	192.8	151.3925	192.8	
6	TACTICAL	CDF T31	DIV M	159.3825	192.8	159.3825	192.8	
7	TACTICAL	VFIRE 24	DIV R	154.2725	156.7	154.2725	156.7	
8	TACTICAL	VFIRE 25	DIV W / X	154.2875	156.7	154.2875	156.7	
9	TACTICAL	VFIRE 26	STAGING	154.3025	156.7	154.3025	156.7	
10		CH 10						
11		CH 11						
12		CH 12						
13		CH 13						
14	MEDICAL	CALCORD	MEDICAL	156.0750	156.7	156.0750	156.7	
15	AIR TO GROUND	A/G	AIR TO GROUND	159.2250	192.8	159.2250	192.8	CDF T14
16	EMERGENCY	GUARD 04	EMERGENCY	168.6250		168.6250	110.9	EMERGENCY ONLY (CLONED ON 8/4/16)
17		CH 17						
18		CH 18						
19		CH 19						
20	EMERGENCY	GUARD 04	EMERGENCY	168.6250		168.6250	110.9	EMERGENCY ONLY (CLONED ON 8/4/16)
5. Special Instructions								
6. Prepared by (Communications Unit Leader): Name: TIM MAGUIRE COML			Signature: 			Date/Time: August 6, 2016		
ICS 205								



COLD INCIDENT-2016-CA-LNU-007135



-Phone List-

Accommodations- 530-355-5227

Communications- 530-454-5178

Logistics- 951-225-4509

Medical- 925-588-6836

Finance- 951-225-4506

PIO- 951-225-4507

Supply- 805-903-3416

Demob- 925-324-8425

Ground Support- 530-708-2732

Fire Info Hotline- 707-967-4207

MEDICAL PLAN ICS 206	1. INCIDENT NAME COLD FIRE	2. DATE PREPARED 08/06/16	3. TIME PREPARED 2100	4. OPERATIONAL PERIOD 8/7/16 – 8/8/16 0700-0700
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5. INCIDENT MEDICAL AID STATIONS			
MEDICAL SUPPLY TRAILER	LOCATION	PARAMEDICS	
FRONTLINE	ICP NEXT TO THE SHOWER UNIT	YES	NO
			X

6. TRANSPORTATION			
A. AMBULANCE SERVICES			
NAME	LOCATION	PHONE	PARAMEDICS
			YES NO
CALSTAR (Odd Days)	Vacaville	800-252-5050	X
Reach Ambulance (Even Days)	Concord	800-338-4045	X
American Medical Response	West Sacramento	800-913-9122 916-439-4604	X
CAL FIRE Copter104 (Day)	Brooks Heli Base	Cold Communications	X

B. INCIDENT AMBULANCES			
NAME	LOCATION	PARAMEDICS	
		YES	NO
AMR 461	Highway 128/ Pleasants Valley	X	

7. HOSPITALS								
NAME	ADDRESS	TRAVEL TIME		PHONE	HELIPAD		BURN CENTER	
		AIR	GRND		YES	NO	YES	NO
Med Net Channel								
Kaiser (Level 2 Trauma)	1 Quality Dr. Vacaville CA	2	8	707-624-4000 707-452-9892	X			X
UC Davis Medical Center (Level 1 Trauma / Burn)	2315 Stockton Blvd, Sacramento CA 95817	12	30	916-734-2011 916-734-5669	X		X	
Vaca Valley Hospital	1000 Nut Tree Rd. Vacaville	3	16	707-624-7000 707-624-7810	X			X

8. MEDICAL EMERGENCY PROCEDURES

LINE EMERGENCY:

Crew Supervisor will contact Division Supervisor with patient complaint/condition and location.

- Division/Group Supervisor contacts:
 1. Communications Unit
 2. Closest EMS resource
- Communications Unit contacts:
 1. Ground or Air ambulance as requested
 2. Operations
 3. Safety
 4. Medical Unit
- Division Supervisor or designee will serve as point of contact and run medical emergency on assigned channel.
 1. A pre-assigned tactical frequency (i.e. CALCORD) should be used for IWI and only for duration of need.
- Communications Unit will clear command channel for emergency traffic as needed and only for duration of need.

CAMP EMERGENCY:

Contact Medical Unit with patient complaint/condition and location. Medical Staff will respond to stabilize incident:

- Medical Unit contacts:
 1. Communications
 2. Safety
 3. Logistics
 4. Operations
 5. Crew Supervisor
 6. Comps/Claims

INJURY REPORTING PROCEDURES

NATURE OF INJURY _____

LOCATION OF PATIENT _____

POINT OF CONTACT _____

TRANSPORTATION REQUESTED BY: AIR ___ GROUND ___

POINT OF PICKUP _____

LAT _____ LONG _____ Datum WGS84

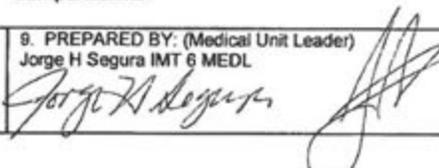
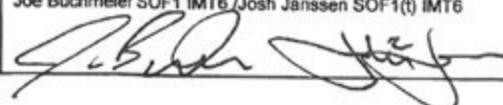
PATIENT UNIT ID _____

IS AN EMT WITH PATIENT: YES ___ NO ___

AGE _____

SEX: MALE ___ FEMALE ___

ALL EMERGENCIES—Secure the area and identify witnesses for later investigation. Keep an accurate log of events.

ICS 206 (Rev 03/12) FR	9. PREPARED BY: (Medical Unit Leader) Jorge H Segura IMT 6 MEDL 	10. REVIEWED BY: (Safety Officer) Joe Buchmeier SOF1 IMT6 / Josh Janssen SOF1(t) IMT6 
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Training Message

Trainees and Trainers -- if either or both are demobing

You need to remember to check out, **together**, with the Training Specialists prior to being demobed to complete the paperwork and discuss the training assignment.

- Trainers need to sign off completed parts of the task book achieved on this assignment and discuss the assignment with the trainees.
- Complete an Evaluation Record.
- Trainers will also need to do an Incident Personnel Performance Rating (ICS 225- available in Training) and discuss their comments with the trainee.

If you do all this, the rest will take just a few minutes.

Training Watch Out

You haven't looked at your task book since checking in last week.

Early in the shift, take a few minutes to review your task book, **together**, and plan the day. There are still plenty of opportunities to work on evaluating some tasks.

Don't miss a chance to get a task signed off.

FACILITIES MAP
COLD FIRE
 CA-LNU-007135
 8/7/2016
 → ONE WAY TRAFFIC
 NOT TO SCALE



Pena Adobe Regional Park

Lagoon Valley Park

SECURITY

PIO

CREW SLEEPING AREA

518
 Vera Rd

OVERHEAD PARKING

EQUIPMENT PARKING

MEDICAL

LAUNDRY SHOWERS

LUNCH WATER ICE

SUPPLY / FUEL

ICP

BRIEFING

DMOB INSP

SECURITY

M K U

LOFR OES
 ORD M

PIO
 TIME

SITL
 COMP COST

RESL PLANS
 PROC

DOCL TRNG
 FSC

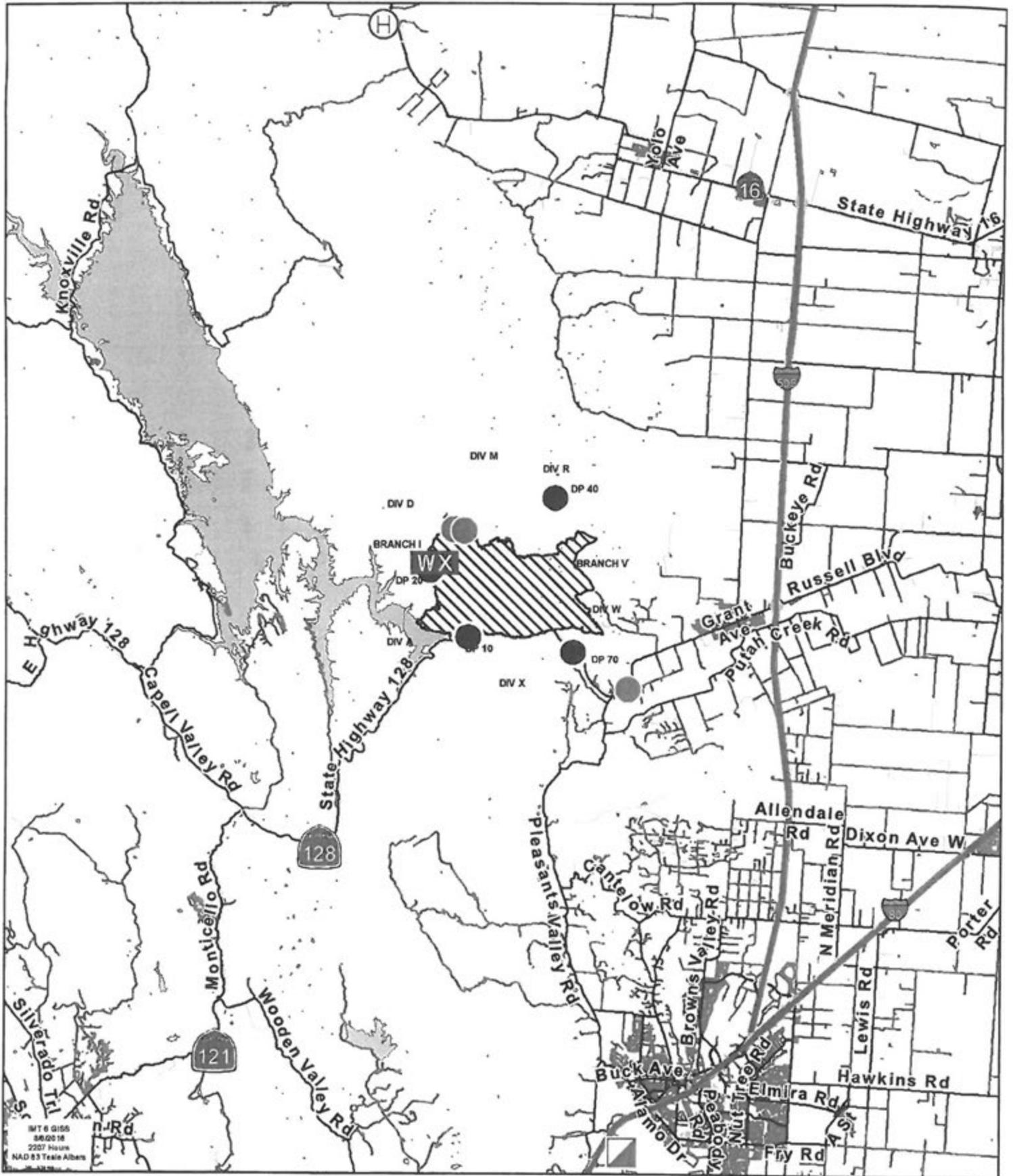
SCKN DMOB

OPS SOFR
 MED FDUL
 IC
 MOTL
 RADIO

CLERICAL

LOGS

Lagoon Valley Rd



MT 6 G155
56,0018
2207 Hours
NAD 83 Texas Albers



1:200,000

- Drop Point
- ⊗ Division
- || Branch
- ⊞ Helibase
- ▣ ICP
- Fire Perimeter



TRAVEL MAP
Cold Incident
CA LNU 007135





CAL FIRE INCIDENT MANAGEMENT TEAM 6



BRIAN ESTES – INCIDENT COMMANDER

DEMOBILIZATION PLAN - SUMMARY

Cold Incident
CA-LNU-7135
GENERAL INFORMATION

The Demobilization Plan is developed to facilitate the orderly removal and checkout of resources on the incident. By definition, surplus personnel are available for release if they have rested for a minimum of 8 hours, are cleaned up, outfitted and have a vehicle ready to depart to their next destination.

GENERAL GUIDELINES

- o **NO RESOURCES WILL LEAVE THE INCIDENT UNTIL AUTHORIZED TO DO SO BY THE DEMOB UNIT.**
- o Efforts will be made to ensure that all released personnel arrive at their destination prior to 2200 hours.
- o All government and hired vehicles leaving the incident will have a safety inspection. If a vehicle is within 1,000 miles of a "B" service, it is the responsibility of the resource to contact Ground Support and have an oil change prior to their scheduled demob time.
- o All trainees are to keep their time up to date and report to the Training Specialist with their task books and evaluations prior to completion of the demobilization process.
- o All strike team leaders are responsible to call North Ops at 1-800-237-3703 immediately upon being released from the incident.

RESPONSIBILITIES

Unit Leaders will declare resources excess to their **Section Chief**. **Section Chiefs** will declare excess resources to the Planning Section Chief through the **Resource Unit Leader**. This should be done 36 hours in advance of anticipated release. Use the **Declaration of Excess Resources sheet or General Message Form (ICS-213)** to list all **excess resources**. Include the resource name, request number, name of person, date and time of declared excess, and time in which the resource will be eligible to leave. Send to the **RESOURCE UNIT** where the resource will be determined to be surplus to the incident. Surplus resources will then be able to report to the **DEMOB UNIT**, receive a Demobilization Checkout Form (ICS 221), get the appropriate ICS 221 signatures, and then return the completed ICS 221 to the **DEMOB UNIT** prior to final release or reassignment.

RELEASE PRIORITIES

1. Organized fire departments
2. OES engines
3. Hired personnel and equipment
4. Other agencies (USFS, BLM, etc.)
5. Out of region Cal Fire forces
6. Within Region Cal Fire Forces
7. Unit CAL FIRE Forces

TRAVEL INFORMATION

All resources will meet agency specific requirements on hours of travel per day. For CAL FIRE hand crews, a full 24 hour reset period shall be adhered to before departing from the incident. After a crew's last operational period they shall begin the demobilization release procedure during their 24 hour off shift. In addition, they must use the following complete 24 hour period as reset time before they depart from the incident.

SHIFT TICKET EXAMPLE

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name			
Incident or Project Name COLD FIRE			Incident Number CALNU 007135	Request Number E#	DOZER DUDE			
Agreement Number XXX - 000000 - 00			Operator #1 BOB SMITH		Operator #2 TOM SMITH			
Equipment Make CAT			Equipment Model / Type D6XM		Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government			
Serial Number 111111			Licence Number 111111		Operating Supplies Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government			
Equipment Use			(Circle) Hours Days / Miles		Equipment Status			
Date Mo / Day	Start	Stop	Work	Assignment	<input checked="" type="checkbox"/> Inspected <input checked="" type="checkbox"/> Under Agreement			
8/3	1300	1700	4	Travel	<input type="checkbox"/> Released by Government			
8/3	1701	2400	8	DIV M	<input type="checkbox"/> Withdrawn by Contractor			
8/4	0001	700	7	DIV M	Remarks/Comments ** TWO OPERATORS NO DAMAGE/ NO CLAIMS			
Vendor Rating			Poor*	Avg.	Good	Exc.	N/A	
Met Performance Expectations			Vendor Rating must be done.				Govt. Rep. Name and Position - PRINT Mike Weber	
Equipment in Safe Working Condition							Govt. Rep. Signature <i>Mike Weber</i>	
Operator Skill Level							Contractor Signature <i>Bob Smith</i>	
Operates Safely							Date 08/04/15	Time 0800
Operator's Cooperation Level							Calfire 297 (Rev 3-2011)	
Overall Performance			* NOTE: Any rating of POOR requires an explanation in Comment Section.					
			**Final evaluation or for more documentation, use an ICS Form 230 or equivalent.					
Pink - Finance			Blue - Home Unit HE Coordinator		Yellow - Vendor		White - Govt Representative	

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name			
The responsible Government Officer will complete this form each shift.					DUDE TRANSPORT			
Incident or Project Name COLD FIRE			Incident Number CALNU 007135	Request Number E # Here	BOB SMITH			
Agreement Number XXX - 000000 - 00			Operator #1 BOB SMITH		Operator #2 TOM SMITH			
Equipment Make TRANSPORT/ KENWORTH			Equipment Model / Type COZAD TRAILER /26 WHEELS		Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government			
Serial Number 1XP3ESMP14239012			Licence Number 9999999		Operating Supplies Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government			
Equipment Use			(Circle) Hours Days / Miles		Equipment Status			
Date Mo / Day	Start	Stop	Work	Assignment	<input checked="" type="checkbox"/> Inspected <input checked="" type="checkbox"/> Under Agreement			
8/3	1300	1800	5	Travel	<input type="checkbox"/> Released by Government			
8/3	1901	2400	5	DIV M	<input type="checkbox"/> Withdrawn by Contractor			
8/4	0001	7	7	DIV M	Remarks/Comments ** 2 OPERATORS NOT AVAIL NO DAMAGE/ NO CLAIMS			
Vendor Rating			Poor*	Avg.	Good	Exc.	N/A	
Met Performance Expectations			Vendor Rating must be done.				Govt. Rep. Name and Position - PRINT Mike Weber	
Equipment in Safe Working Condition							Govt. Rep. Signature <i>Mike Weber</i>	
Operator Skill Level							Contractor Signature <i>Bob Smith</i>	
Operates Safely							Date 08/04/15	Time 0800
Operator's Cooperation Level							Calfire 297 (Rev 3-2011)	
Overall Performance			* NOTE: Any rating of POOR requires an explanation in Comment Section.					
			**Final evaluation or for more documentation, use an ICS Form 230 or equivalent.					
Pink - Finance			Blue - Home Unit HE Coordinator		Yellow - Vendor		White - Govt Representative	

Turn shift tickets into Finance.

SHIFT TICKET EXAMPLE

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name	
Incident or Project Name COLD FIRE			Incident Number CALNU 007135		Request Number E or S # Here	
Agreement Number XXX - 000000 - 00					Operator #1 BOB SMITH	
Equipment Make FREIGHTLINER					Equipment Model / Type WATER TENDER 2500 + GAL	
Serial Number 1XP3ESMP14239012			Licence Number 55555555		Operator #2 BOB SMITH	
Equipment Use (Circle) Hours Days / Miles					Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Date Mo / Day Start Stop Work Assignment					Operating Supplies Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
8/3 1300 1700 4 Travel					Equipment Status <input checked="" type="checkbox"/> Inspected <input checked="" type="checkbox"/> Under Agreement	
8/3 1701 2400 7 DIV Z					Released by Government <input type="checkbox"/> Withdrawn by Contractor <input type="checkbox"/>	
8/4 0001 700 7 OFF SHIFT					Remarks/Comments ** ONE OPERATOR NO DAMAGE/ NO CLAIMS	
Vendor Rating					Gov. Rep. Name and Position - PRINT Mike Weber	
Met Performance Expectations					Gov. Rep. Signature <i>Mike Weber</i>	
Equipment in Safe Working Condition					Contractor Signature <i>Bob Smith</i>	
Operator Skill Level					Date 08/04/15	
Operates Safely					Time 0800	
Operator's Cooperation Level					Calfire 297 (Rev 3-2011)	
Overall Performance						
* NOTE: Any rating of POOR requires an explanation in Comment Section. **Final evaluation or for more documentation, use an ICS Form 230 or equivalent.						
Pink - Finance		Blue - Home Unit HE Coordinator		Yellow - Vendor		White - Govt Representative

EMERGENCY SHIFT TICKET and EVALUATION FORM					Contractor Name	
The responsible Government Officer will complete this form each shift						
Incident or Project Name COLD FIRE			Incident Number CALNU 007135		Request Number E OR S # Here	
Agreement Number XXX - 000000 - 00					Operator #1 BOB SMITH	
Equipment Make PETERBUILT					Equipment Model / Type WATER TENDER 2500 + GAL	
Serial Number 1XP3ESMP14239012			Licence Number 9999999		Operator #2 BILL SMITH	
Equipment Use (Circle) Hours Days / Miles					Operator Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
Date Mo / Day Start Stop Work Assignment					Operating Supplies Furnished By: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government	
8/3 1300 1800 5 Travel					Equipment Status <input checked="" type="checkbox"/> Inspected <input checked="" type="checkbox"/> Under Agreement	
8/3 1800 2400 6 DIV M					Released by Government <input type="checkbox"/> Withdrawn by Contractor <input type="checkbox"/>	
8/4 0001 700 7 DIV M					Remarks/Comments ** 2 OPERATORS NO DAMAGE/ NO CLAIMS	
Vendor Rating					Gov. Rep. Name and Position - PRINT Mike Weber	
Met Performance Expectations					Gov. Rep. Signature <i>Mike Weber</i>	
Equipment in Safe Working Condition					Contractor Signature <i>Bob Smith</i>	
Operator Skill Level					Date 08/04/15	
Operates Safely					Time 0800	
Operator's Cooperation Level					Calfire 297 (Rev 3-2011)	
Overall Performance						
* NOTE: Any rating of POOR requires an explanation in Comment Section. **Final evaluation or for more documentation, use an ICS Form 230 or equivalent.						
Pink - Finance		Blue - Home Unit HE Coordinator		Yellow - Vendor		White - Govt Representative

Turn shift tickets into Finance.

FIRE SUPPRESSION REPAIR PLAN: COLD INCIDENT

Fire suppression repair is the repair of damage caused directly from fire suppression activities. It is not the repair of infrastructure or rehabilitation of burned areas that happened as a result of the fire itself.

Damaged facilities will be upgraded to their pre-fire condition. Projects too large or complex to be completed by the Fire Suppression Repair Group shall be transferred to the Comp/Claims Unit or the local Unit. Repair work shall only occur in locations authorized by the Operations Section and where fire suppression activities are complete. Fire Suppression Repair Group resources shall evaluate all Divisions for appropriate repair needs. This includes areas inside and outside the fire perimeter, provided the damage was caused by official fire suppression activities.

Examples of items that may be repaired include, but are not limited to:

Infrastructure Damage	Natural Resource Damage
Fences and gates	Soil erosion
Culverts, bridges, and other watercourse crossings	Adverse impacts to air and water quality
Water sources	Adverse impacts to protected species of plants and animals
Utility distribution lines (above or below ground)	
Road barriers removed for fire access	
Trash, debris, and supplies left by fire suppression resources	
Miscellaneous damage to residential property	

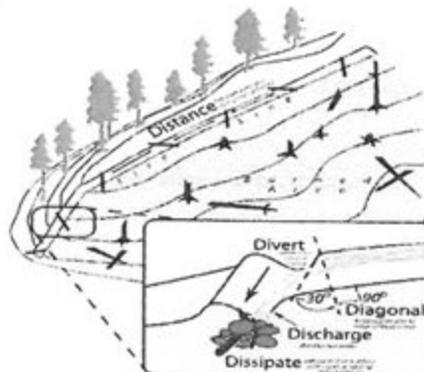
Dozer Line Repair

Dozers construct both fire and contingency lines. Dozer line width varies greatly. The following measures shall be implemented for constructed dozer line:

- Berms and push-piles shall be spread out to the extent feasible. This may be accomplished by back-blading and/or using ripper shanks or grapples. Debris piled against trees or perched above watercourses is especially important to remove or disperse.
- Waterbreaks shall be constructed at an approximately 45 degree angle and shall be a minimum depth of 12 inches from the bottom of the cut to the top of the berm. Where feasible, the discharge from waterbreaks shall be directed into vegetated areas.
- Where slopes exceed the range at which a tractor can effectively work, waterbreaks shall be constructed with hand tools.
- Roads used in fire suppression activities shall be left in the same condition they were found or better. Gravel and soil-surfaced roads shall be watered to prevent excessive dust. Where fire suppression activities have damaged or rendered road drainage facilities non-functional, waterbreaks or drivable drainage dips shall be installed for drainage.
- Where fire suppression activities have filled in or damaged inside ditches, the ditches shall be cleaned and left unobstructed.
- Spacing of waterbreaks shall be as follows:

Prevailing gradient	Maximum waterbreak spacing
0-10%	200 feet
11-25%	150 feet
26-50%	100 feet
>50%	75 feet

Spacing criteria is a general guide. Actual location of waterbreaks should be tailored to the topography and placement suited to the best dispersal of water flow.



Fire Suppression Repair

It is time to begin planning for the fire suppression repair efforts. A fire suppression repair plan will be developed for the LNU Cold Incident. To accomplish our goals we need to identify problem areas, prescribe the needed work, and ensure that the work is completed.

In an effort to identify problem areas we have created the attached form for use by the Branches and Divisions. As noted on the form, items to consider include: fences and gates damaged during the incident; road and watercourse crossings repairs; culverts and watercourses needing cleanout; fire breaks in need of waterbarring; trash and equipment pickup.

Use the attached form(s) to document locations where repair work may be necessary. Use maps to show locations. Return forms to the Suppression Repair Unit at the end of your shift.

Fire Suppression Repair Checklist CA-LNU-007135

Fire Name COLD Form Preparer _____

Division _____ Date Prepared _____

Work Needed

Location
(T./R./S.)

Fence/Gate Repair _____

Waterbars _____

Road Repair _____

Watercourse Cleanout _____

Culvert Cleanout and Repair _____

Seeding/Mulching Watercourse Crossing _____

Trash Pickup _____

Other _____

Note: List type of material/equipment/personnel needed (e.g. fencing material, tools, dozer, backhoe, stakeside, handcrew etc.)



FROM THE DESK OF DOCUMENTATION

COLD INCIDENT

Who needs to turn in what?



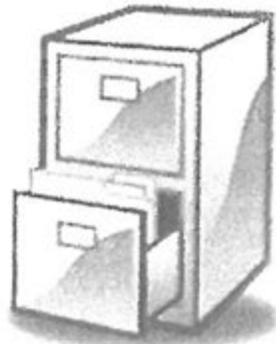
Unit Logs (ICS-214s) are required by Strike Team Leaders and above. However, Crews, Engines and possibly other contractors working on the line or in camp, may be asked to fill them out, especially if there has been a significant event that may need to be documented, or if requested by your Supervisor.



Copies of the Crew Evaluations (ICS-224s) and Personnel Evaluations (ICS-225s) are sent to your home unit or business office. Therefore, it is imperative to provide the home unit name or business name and full address on the evaluation form. Also put your REQUEST # AND RESOURCE ID AT TOP.

Thanks for your help and cooperation.

Susan Hudson ~ Documentation Unit



COLD FIRE

*****SITUATIONAL AWARENESS FOR OFF SITE HOTEL STAYS*****

- Keep your eyes open when entering the parking lot to park
- Watch out for each other as you unload your equipment
- Take all of your valuables into the hotel if at all possible
- Lock all of the equipment you need to inside a locked part of your rig
- Park under lights when possible
- Ask the Hotel if they have security and if they do ask for patrols
- Walk around your equipment prior to entering and leaving
- Always watch your surroundings

Scott McCartney, CALFIRE IMT 6 LEO

Steve White, CALFIRE IMT 6, CHP LEO

1. Incident Name:

2. Operational Period: Date From:
Time From:

Date To:
Time To:

3. Name:

4. ICS Position:

5. Home Agency (and Unit):

Date/Time

Notable Activities

8. Prepared by: Name: _____ Position/Title: _____ Signature: _____
ICS 214, Page _____ of _____ Date/Time: _____

