

# **Status/Check-in Recorder S-248**

Sponsored for NWCG publication by the NWCG Training Working Team, August 1998.

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Comments regarding the content of this publication should be directed to: National Interagency Fire Center,  
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Additional copies of this publication may be ordered from: National Interagency Fire Center, ATTN: Great Basin  
Cache Supply Office, 3833 S. Development Avenue, Boise, Idaho 83705. Order NFES # 1976.

**Student Workbook (self-paced)**

**August 1998**

**NFES 1976**

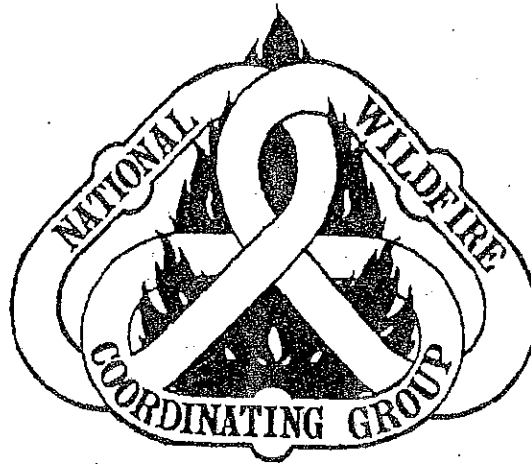
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## CERTIFICATION STATEMENT

on behalf of the

NATIONAL WILDFIRE COORDINATING GROUP

*The following training material attains the standards prescribed for courses developed under the interagency curriculum established and coordinated by the National Wildfire Coordinating Group. The instruction is certified for interagency use and is known as:*

Status/Check-in Recorder, S-248  
Certified at Level I

Member NWCG and Training Working Team Liaison

Date

8/4/98

Chairperson, Training Working Team

Date

7/20/98

## Description of the Performance Based System

The Wildland Fire Qualifications System is a "performance based" qualifications system. In this system, the primary criteria for qualification is individual performance as observed by an evaluator using approved standards. This system differs from previous wildland fire qualifications systems which have been "training based." Training based systems use the completion of training courses or a passing score on an examination as a primary criteria for qualification.

A performance based system has two advantages over a training based system:

- Qualification is based upon real performance, as measured on the job, versus perceived performance, as measured by an examination or classroom activities.
- Personnel who have learned skills from sources outside wildfire suppression, such as agency specific training programs or training and work in prescribed fire, structural fire, law enforcement, search and rescue, etc., may not be required to complete specific courses in order to qualify in a wildfire position.

1. The components of the wildland fire qualifications system are as follows:

- a. Position Task Books (PTB) contain all critical tasks which are required to perform the job. PTB's have been designed in a format which will allow documentation of a trainee's ability to perform each task. Successful completion of all tasks required of the position, as determined by an evaluator, will be the basis for recommending certification.

IMPORTANT NOTE: Training requirements include completion of all required training courses prior to obtaining a PTB. Use of the suggested training courses or job aids is recommended to prepare the employee to perform in the position.

- b. Training courses and job aids provide the specific skills and knowledge required to perform tasks as prescribed in the PTB.
- c. Agency Certification is issued in the form of an incident qualification card certifying that the individual is qualified to perform in a specified position.

2. Responsibilities

The local office is responsible for selecting trainees, proper use of task books, and certification of trainees, see the Task Book Administrators Guide 330-1 for further information.

## PREFACE

Status/Check-in Recorder, S-248 is a suggested course in the National Interagency Incident Management System (NIIMS) Wildland Fire Qualification Subsystem. This course was developed by an interagency group of subject matter experts with direction and guidance from the National Interagency Fire Center (NIFC), National Fire and Aviation Training Support Group. The primary participants in this development effort were:

### U.S. Forest Service

Payette National Forest .....Jeff Luff

### Bureau of Land Management

Salt Lake District Office.....Dan Washington

### Bureau of Indian Affairs

Fort Apache Agency .....Chris Lyle

1. The first part of the report is a general introduction to the subject of the study. It discusses the importance of the study and the objectives of the research. It also provides a brief overview of the methodology used in the study.

2. The second part of the report is a detailed description of the methodology used in the study. It discusses the data collection methods, the sample size, and the statistical analysis techniques used.

3. The third part of the report is a detailed description of the results of the study. It discusses the findings of the study and the conclusions drawn from the results.

4. The fourth part of the report is a discussion of the implications of the study. It discusses the practical applications of the findings and the limitations of the study.

5. The fifth part of the report is a conclusion. It summarizes the findings of the study and provides a final statement on the importance of the study.

6. The sixth part of the report is a list of references. It lists the sources of information used in the study.

7. The seventh part of the report is an appendix. It contains additional information that is not included in the main body of the report.

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## INTRODUCTION

Status/Check-in Recorder, S-248, is a 16 hour self-paced course. The course consists of the Status/Check-in Recorder Job Aid, Student Workbook, and final examination. The job aid provides instructions on how to check-in and track the status of incident resources with illustrations and examples on how to complete the necessary forms. The self-paced Student Workbook provides the trainee an opportunity to apply the information in the job aid by completing exercises which simulate incident situations. The workbook contains solutions to the exercises for the trainee to monitor their progress throughout the course. After completing the Student Workbook the trainee must then contact the course administrator to schedule the final examination.

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Arar and Collins (1971) using a Shimadzu 1010 spectrophotometer.

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## COURSE INFORMATION

### Course Objective

Given simulated situations the trainee will:

- check-in incident resources on ICS Form 211, Check-in List.
- record necessary information and update resource status on ICS Form 219, Resource Status Cards.
- track status of incident resources by proper placement of ICS Form 219, Resource Status Cards in a Resource Locator.

### Course Prerequisites

There are no course prerequisites, however the following is suggested training prior to completing Status/Check-in Recorder, S-248.

- Introduction to ICS (I-100)
- Wildland Fire Suppression Orientation for Non-Operations Personnel (S-110)

## Required Materials

Items needed for each trainee to complete the course are as follows:

S-248, Status/Check-in Recorder Student Workbook (NFES #1976)

Status/Check-in Recorder Job Aid (NFES #1961)

Fireline Handbook (NFES #0065)

Unit Identifiers (NFES #2080)

Current ICS Positions Mnemonics Data Table (available in National Interagency Mobilization Guide (NFES #2092 or Wildland Fire Qualification Subsystem Guide, PMS 310-1, NFES #1414)

ICS Form 211, Check-in List.....6 each (NFES 1335)

ICS Form 219, Resource Status Cards (T-Cards)

ICS Form 219-2 Crew .....7 each (NFES #1344)

ICS Form 219-3 Engine .....4 each (NFES #1345)

ICS Form 219-4 Helicopter .....4 each (NFES #1346)

ICS Form 219-5 Personnel .....7 each (NFES #1347)

ICS Form 219-6 Aircraft .....4 each (NFES #1348)

ICS Form 219-7 Dozer .....3 each (NFES #1349)

ICS Form 219-8 Misc. Equip./Task Force .....5 each (NFES #1350)

## Course Design

This is a self-paced course which allows trainees to complete the course at their own speed at their home unit. This course consists of exercises which gives the trainees an opportunity to complete various ICS Forms for checking in and recording the status of incident resources. There is a solution provided for each exercise which allows the trainees to check their progress.

The Status/Check-in Recorder Job Aid provides instructions, illustrations, and examples of how to check-in and track the status of incident resources and is the primary reference document to complete the course.

After completing the self-paced course contact your course administrator for a copy of the final examination. The two hour final examination is similar to the course exercises and requires a minimum score of 80 percent to receive certification for course completion.

**Exercise #1**  
**Status/Check-in Recorder Kit**

Read page 5 of the Status/Check-in Recorder Job Aid and answer the following questions. A solution to the exercise is provided on page 27 for you to check your progress.

1. What is the purpose of a Status/Check-in Recorder Kit?

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## Exercise #2

### Required Check-in Information and Processing

Read pages 7 through 12 of the Status/Check-in Recorder Job Aid and answer the following questions. A solution to the exercise is provided on pages 29 and 30 for you to check your progress.

1. As a Status/Check-in Recorder assigned to a wildland fire incident, whom do you work for?
  
2. As a Status/Check-in Recorder, why is it important that you get a briefing or a full explanation of what your duties are from the individual in question #1?
  
3. You are a Status/Check-in Recorder assigned to an incident check-in station or location. Why is it important to record all the necessary information and that the information is accurate when resources are checking in?

1. The first part of the document is a letter from the President of the United States to the Congress, dated January 1, 1861.

2. The second part is a report from the Secretary of the Treasury, dated January 1, 1861, on the state of the Treasury.

3. The third part is a report from the Secretary of the Interior, dated January 1, 1861, on the state of the Interior.

4. The fourth part is a report from the Secretary of the Navy, dated January 1, 1861, on the state of the Navy.

5. The fifth part is a report from the Secretary of the War, dated January 1, 1861, on the state of the War.



### Exercise #3 ICS Form 211, Check-in List

Read and review as necessary pages 13 through 23 of the Status/Check-in Recorder Job Aid prior to beginning and during completion of Exercise #3. This exercise will provide you the opportunity to record necessary information on ICS Form 211, Check-in List. A solution to the exercise is provided on pages 31 to 40 for you to check your progress.

Use the following information to complete Exercise #3:

Incident Name.....Carp Fire  
Date..... August 23, 1996  
Order Number..... CA-BDU-590  
Fire Location..... San Bernardino Ranger Unit  
California Department of Forestry and Fire Protection (CDF)

You are the Status/Check-in Recorder assigned to this incident. The following resources are checking in at the incident on August 23rd. Use a blank ICS Form 211 to record and check-in the following resources.

1. At 1630 hours, R. Regan CDF, driving a gasoline powered two wheel drive 1/2 Ton pickup CDF # 6511 from San Bernardino Ranger Unit, home base San Bernardino, Request # O-1, Division/Group Supervisor, also qualified as a Resources Unit Leader arrives. In your interview with R. Regan you find out his last day off was 8/21.
  - Is it important to know the last day off for each resource? Why?
2. At 1720 hours J. Horine San Bernardino National Forest, driving a gasoline powered USFS, two wheel drive, 1/2 Ton pickup, license # A-698762 from home base, Lytle Creek Ranger District, Request #0-2, Division/Group Supervisor, also qualified as a Planning Section Chief (Type II) arrives. Last day off was 8/21.
3. At 1800 hours a CDF Type 3 two wheel drive, gasoline powered, Engine 6578 from Siskiyou Ranger Unit, homebase Yreka, Captain Jim Smith on Request #E-2 arrives. An interview during the check-in process identified L. Henry and C. Johnson as crew members. Last day off was 8/19.

4. At 1801 hours Engine 333, a Type 6, all wheel drive, diesel powered, from the San Bernardino National Forest, the crew consists of foreman Dave Strong and crew members S. Strong, A. Green, B. Williams, M. Link, and S. Smith on Request #E-1 from their home base of Lytle Creek Ranger District arrive. Last day off was 8/18.

- Is it important to know and document if this engine can be double shifted? Why?

In your interview with Dave Strong you found out that S. Strong is qualified as a foreman. M. Link and S. Smith will be crew members for the second operational period and they arrived in a separate all wheel drive, gasoline powered, 3/4 Ton pickup A-445909.

5. At 1810 hours Boise IHC, home base Boise, Idaho, led by Jim Cook with a crew strength of 20, driving USFS diesel powered crew carriers license # A-623541 and license # A-623633 and a gasoline powered two wheel drive pickup license # A-956321 on Request #C-1 arrive. The crew was released from their previous assignment, the Green Horn Fire on the BLM, Bakersfield District with a Request #C-6, at 0800 8/23. Crew weight is 4,817 pounds. Last day off was 8/16.

- Is it important to document the names of the other 19 crew members? Why?

- What is an easy method to obtain the names of the other 19 crew members?

6. At 1815 hours the Wasatch Regulars #2 from the Wasatch/Cache/Uinta National Forest, home base Salt Lake City, led by Maurice Boren, with a crew strength of 20 in a gasoline powered, two wheel drive, 20 passenger bus, California license # 663A5587 on Request #C-5 arrive. Crew weight is 4,357 pounds. Last day off was 8/22.

- Is it important to know the method of travel for the resource? Why?

In your interview with Maurice Boren you find out that the Wasatch Regulars #2 were flown from Salt Lake City to Ontario Airport.

7. At 1830 hours a D-6C dozer from the BLM, California Desert District, home base Riverside, on Request #E-3 with operator M. Jones and swamper B. Flat arrive. Last day off was 8/21.

- What questions do you need to ask the operator and how would you document the information?

After interviewing the operator you find out the transport, I-186512 will stay at the incident, the transport driver's name is B. Quick and is qualified as a relief operator, and the dozer is equipped with lights and a straight blade that can be angled. The District Office can provide a relief swamper if needed. Document this information on the ICS Form 211.

8. At 1930 hours L & L Construction arrives with a D-8 dozer on Request #E-8 from the town of Lake Elsinore. There is only one operator whose name is J. Hancock, no swamper, the dozer has lights and a straight blade that can be angled. The transport must return to town. Last day off was 8/21.

9. At 1945 a 3000 gallon, diesel powered, all wheel drive, water tender with a 350 gpm pump rented from Rezick Equipment arrives. The equipment's home base is San Bernardino, is on Request #E-11, and the operator is S. Craig. Last day off was 8/21.

10. At 2000 hours the Helibase Manager, B. King, informs you that three Bell 205 helicopters arrived at 1400 to the incident. The helicopters are as follows:

San Bernardino National Forest helicopter #34, J. Finnerty pilot from Heap's Peak, Request #A-1. Last day off was 8/18.

San Bernardino National Forest helicopter #36, D. Carter pilot from Del Rosa, Request #A-2. Last day off was 8/19.

San Bernardino Ranger Unit helicopter #601, M. Sanchez pilot from Ryan Field, Request #A-3. Last day off was 8/21

B. King's Request # is O-3 and he's from Tulare Ranger Unit, home base Tulare, and arrived in gasoline powered, two wheel drive, 1/2 Ton pickup CDF # 22398. He's also qualified as Air Support Group Supervisor. Last day off was 8/16.

11. At 2030 hours you receive an ICS Form 213, General Message from the communications unit stating Air Tactical Group Supervisor, K. Sigsbee, San Bernardino National Forest, flying in Air Attack 610 (Cessna 340), Request #A-4, pilot's name U. Turn from Ryan Field were assigned to the incident at 1400. The pilot's last day off was 8/20. Two Type II air tankers from Ryan Field, San Bernardino National Forest #138 (DC-6) and #135 (P2V), Request #s A-5 and A-6, with their last day off being 8/20, were assigned to the incident at 1400.

- Since the General Message Form did not give you all the necessary information to check Sigsbee in, how would you obtain the missing information?

Upon checking with the ordering manager you learn Sigsbee's request # is O-8 and he is from the San Bernardino National Forest Supervisor's Office. He has his own transportation, a two wheel drive, gasoline powered, sedan, license # A537695 and is qualified as a fireline blaster. Last day off was 8/20.

12. At 2100 a gasoline powered, all wheel drive, 3/4 ton pickup, license # A-697548 from the San Bernardino National Forest based at San Bernardino arrived on Request #E-9. The vehicle is driven by Mary Stanton and her request # is O-9. Last day off was 8/21.
13. At 2115 two BIA crews from San Carlos Agency, Arizona arrive by motor coach. The crews are San Carlos #57 with 20 persons, Crew Boss R. Clayton, crew weight 4135 lbs. and San Carlos #58 with 19 persons, Crew Boss B. Pahe, crew weight 4367 lbs. Their request #'s are C-3 and C-4. The Crew Representatives are M. Thorn and C. Smith from the Coronado National Forest. Their home base is Safford, Arizona. The motor coach will not stay with the crews. Last day off was 8/22. You learned from your interview that the Crew Representatives had their last day off on 8/21.

14. At 2200 CDF Captain Barry Olsen driving a CDF gasoline powered, all wheel drive, 1/2 Ton pickup, license # 432K1689 arrived with a Strike Team of Type 3 CDF two wheel drive engines out of Riverside Ranger Unit. His request # is E-11. Captain Olsen's home base is Beaumont, but he left Perris Headquarters at the time of dispatch to the incident. His other ICS qualification is Division/Group Supervisor. Last day off was 8/13. The engines in the strike team are:
- 6186 Engineer John Smith plus B. Day and J. Moore from Anza Station. They departed for the incident from Beaumont. Last day off was 8/19.
  - 6178 Captain Brad Eaton plus F. Dill and T. Green from Elsinore Station. They departed for the incident from Beaumont. Last day off was 8/19.
  - 6177 Engineer Marvin Craig plus D. Black and C. Gray from Temecula Station. They departed for the incident from Sunnymead. Last day off was 8/16.
  - 6190 Captain Claude Johnson plus G. Smith and S. Jones from Hemet Station. They departed for the incident from Sunnymead. Last day off was 8/16.
  - 6176 Engineer Brian Gumble plus M. Gaylord and P. Thompson from Perris Station. They departed for the incident from Highgrove. Last day off was 8/20.

Captain Olsen said that engine 6190 was a diesel engine and all others were gasoline engines.

Since the information about this Strike Team of Engines can not be captured on the Resource Status Card ("T" card), how would you document this information?

15. At 2305 hours Strike Team Leaders (crew) W. Thomas, Request #O-4, and S. Nez Request #O-5 arrive. They drove together in a gasoline powered, all wheel drive, 3/4 Ton pickup, license # I-165847 from the Ft. Apache Agency in Whiteriver, Arizona. Both are also qualified as Task Force Leaders and their last day off was 8/21.
16. At 2355 the Mormon Lake IHC from the Coconino National Forest in Flagstaff, Arizona arrive. They flew by Convair to the Ontario Airport and were transported to the incident base. Crew needs ground transportation while on this Incident. You learned from your interview that the Crew Superintendent is a qualified Division/Group Supervisor and the Crew Foreman is a qualified Emergency Medical Technician 1. Refer to the Crew Manifest on page 21 of the Status/Check-in Recorder Job Aid for any additional information needed for check-in. Last day off was 8/22.

1. The first step in the process of the investigation is the identification of the problem. This is done by the investigator who is responsible for the investigation. The investigator must identify the problem and the scope of the investigation. The investigator must also identify the objectives of the investigation. The investigator must then develop a plan of action to address the problem. The plan of action should include the methods to be used, the resources to be used, and the timeline for the investigation. The investigator should also identify the personnel who will be involved in the investigation. The investigator should then implement the plan of action and collect the data. The investigator should then analyze the data and draw conclusions. The investigator should then report the findings of the investigation to the appropriate authorities. The investigator should also provide recommendations for the future. The investigator should also provide a copy of the report to the appropriate authorities. The investigator should also provide a copy of the report to the appropriate authorities.



## Exercise #4

### ICS Form 219, Resource Status Card

Read and review the Status/Check-in Recorder Job Aid pages 25 through 58 prior to beginning this exercise. This exercise will provide you the opportunity to transfer necessary information from ICS Form 211, Check-in List to the appropriate ICS Form 219, Resource Status Card (T-Card). A solution to the exercise is provided on pages 41 to 67 for you to check your progress.

#### Exercise #4 Directions:

Transfer the necessary information for each resource identified in items 1-16 of Exercise #3 to the appropriate ICS Form 219, Resource Status Card (T-Card); i.e., ICS Form 219-2 Crew, ICS Form 219-3 Engine, ICS Form 219-4 Helicopter, ICS Form 219-5 Personnel, ICS Form 219-6 Aircraft, and ICS Form 219-7 Dozer.

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## Exercise #5 Updating Resource Status and Resource Locator

Read and review the Status/Check-in Recorder Job Aid pages 59 through 65 prior to beginning this exercise. This exercise will provide you the opportunity to update necessary information on ICS Form 219, Resource Status Cards (T-Cards) and the Resource Locator.

### Exercise #5 Part 1 Directions:

It is now August 24th, 0600 hours and all resources have been assigned on the incident as identified below. Record this status change information on each appropriate ICS Form 219, Resource Status Card that was completed in Exercise 4. Resources are identified by their Resource Order Request #; i.e., O-8, A-5, etc. Operations has requested a Task Force and a Strike Team to be created as indicated below. A solution to Part 1 on pages 69 to 88 is provided for you to check your progress.

### Incident Assignment

Division A ..... O-1, E-1, C-1, E-3

Division B ..... O-2, (CARP TF #1 consisting of O-4, C-5, E-2, E-8, E-11)

Division C ..... J. Tisino (C-2) DIVS, (CARP ST #2 consisting of O-5, C-3 & C-4),  
O-9, E-9, C-2

Group E ..... E-11, with Olson as Group Supervisor

Air Operations

Fixed Wing Base ..... O-8, A-4, A-5, A-6

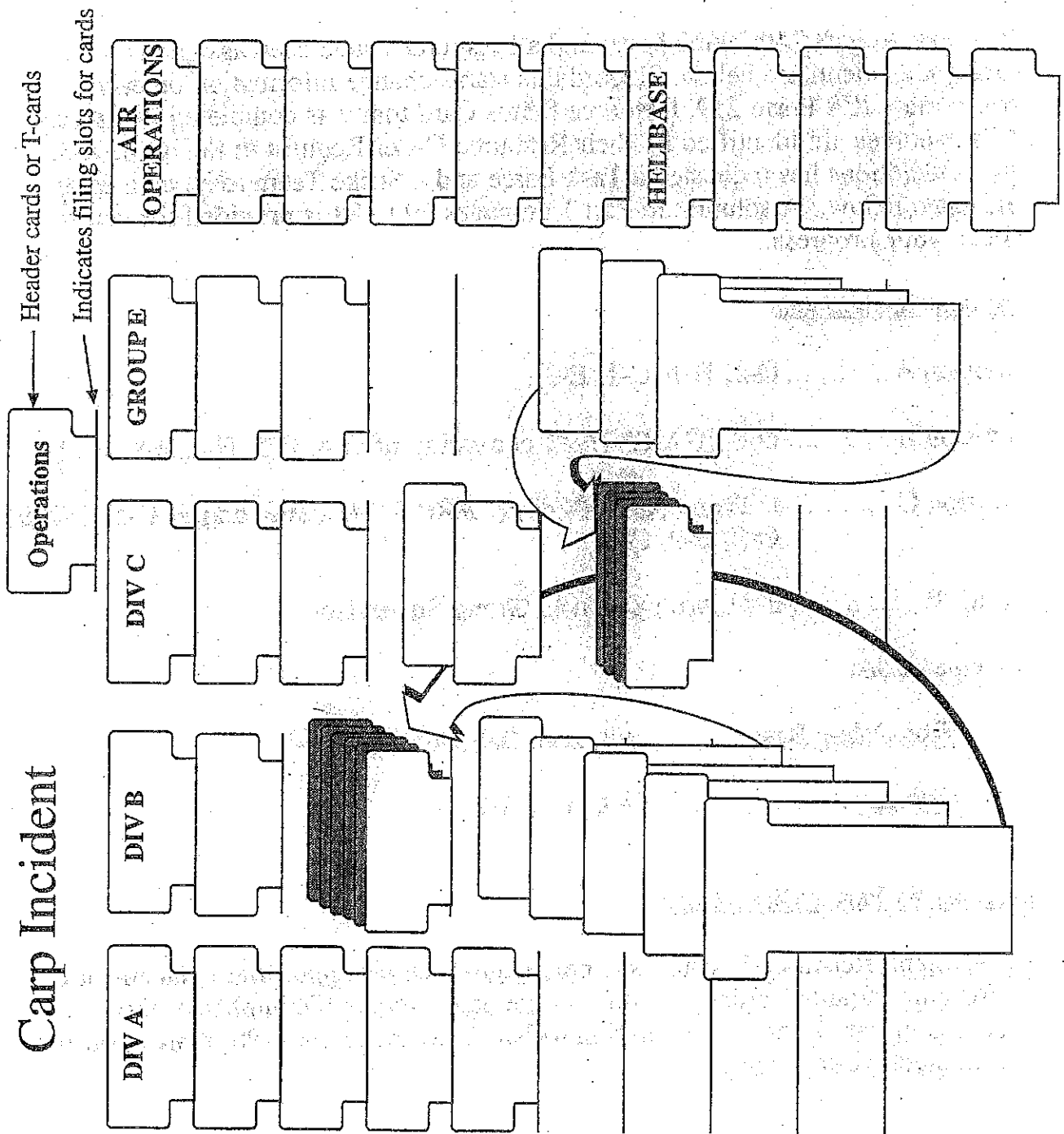
Helibase ..... O-3, A-1, A-2, A-3

### Exercise #5 Part 2 Directions:

On the blank Resource Locator (see next page) identify appropriate placement of the Resource Status Cards by writing in the name and/or ID number of the resources in Part 1 above. A solution to Part 2 on pages 89 to 90 is provided for you to check your progress.

Day 8/24/96

## Exercise 5, Part 2



**Exercise #6**  
**ICS Form 210, Status Change Card**

Read and review pages 67 to 69 of the Status/Check-in Recorder Job Aid prior to beginning this exercise. This exercise will provide you the opportunity to update necessary information on ICS Form 219, Resource Status Card (T-Card) from ICS Form 210, Status Change Card.

Exercise #6 Part 1 Directions

Review the ICS Form 210, Status Change Cards (see next page) that you received from the Communications Unit. Update the status on the ICS Form 219, Resource Status Cards for the resources from Exercise 4 as indicated on the Status Change Cards. A solution to Part 1 on pages 91 to 95 is provided for you to check your progress.

DESIGNATOR CDF E-3 #6578  
NAME/I.D. NO. Request #E-2

STATUS  
☐ ASSIGNED ☐ AVAILABLE ☐ O/S REST  
☒ O/S MECHANICAL ☐ O/S PERSONNEL  
8/27 1200 ETR (O/S = OUT OF SERVICE)

FROM	LOCATION	TO
<u>B</u>	DIVISION	
	STAGING AREA	
	BASE/ICP	<input checked="" type="checkbox"/> O/S
	CAMP	
	ENROUTE	ETA
	HOME AGENCY	

MESSAGE  
Broken Rear Axle

TIME 8/24 1614 RESTAT ☐  
PROCESS

ICS STATUS CHANGE CARD  
FORM  
210

DESIGNATOR Bell 205 #34  
NAME/I.D. NO. Request #A-1

STATUS  
☐ ASSIGNED ☐ AVAILABLE ☐ O/S REST  
☒ O/S MECHANICAL ☐ O/S PERSONNEL  
8/26 0600 ETR (O/S = OUT OF SERVICE)

FROM	LOCATION	TO
	DIVISION <u>B</u>	
	STAGING AREA	
	BASE/ICP	
<input checked="" type="checkbox"/>	<del>CAMP</del> <u>Helibase</u>	
	ENROUTE	ETA
	HOME AGENCY	

MESSAGE  
100 hour maintenance check due

TIME 8/24 1900 RESTAT ☐  
PROCESS

ICS STATUS CHANGE CARD  
FORM  
210

DESIGNATOR BLM D-2 D6C  
NAME/I.D. NO. Request #E-3

STATUS  
☐ ASSIGNED ☒ AVAILABLE ☐ O/S REST  
☐ O/S MECHANICAL ☐ O/S PERSONNEL  
ETR (O/S = OUT OF SERVICE)

FROM	LOCATION	TO
<u>A</u>	DIVISION	
	STAGING AREA	
	BASE/ICP	<u>Base</u>
	CAMP	
	ENROUTE	ETA
	HOME AGENCY	

MESSAGE  
Division Assignment Complete  
Available for Reassignment

TIME 8/25 1200 RESTAT ☐  
PROCESS

ICS STATUS CHANGE CARD  
FORM  
210

DESIGNATOR Boise IHC C-1  
NAME/I.D. NO. Request #C-1

STATUS  
☒ ASSIGNED ☐ AVAILABLE ☐ O/S REST  
☐ O/S MECHANICAL ☐ O/S PERSONNEL  
ETR (O/S = OUT OF SERVICE)

FROM	LOCATION	TO
<u>A</u>	DIVISION	<u>B</u>
	STAGING AREA	
	BASE/ICP	
	CAMP	
	ENROUTE	ETA
	HOME AGENCY	

MESSAGE  
Division A Assignment Complete  
Moved to Division B For Additional Support

TIME 8/25 1300 RESTAT ☐  
PROCESS

ICS STATUS CHANGE CARD  
FORM  
210

## Exercise #6 ICS Form 210, Status Change Card

### Exercise #6 Part 2 Directions

The Resource Status Cards identified with a bold outline in the Resource Locator (on the next page) represent the resources affected by the Status Change Cards from Exercise 6, Part 1.

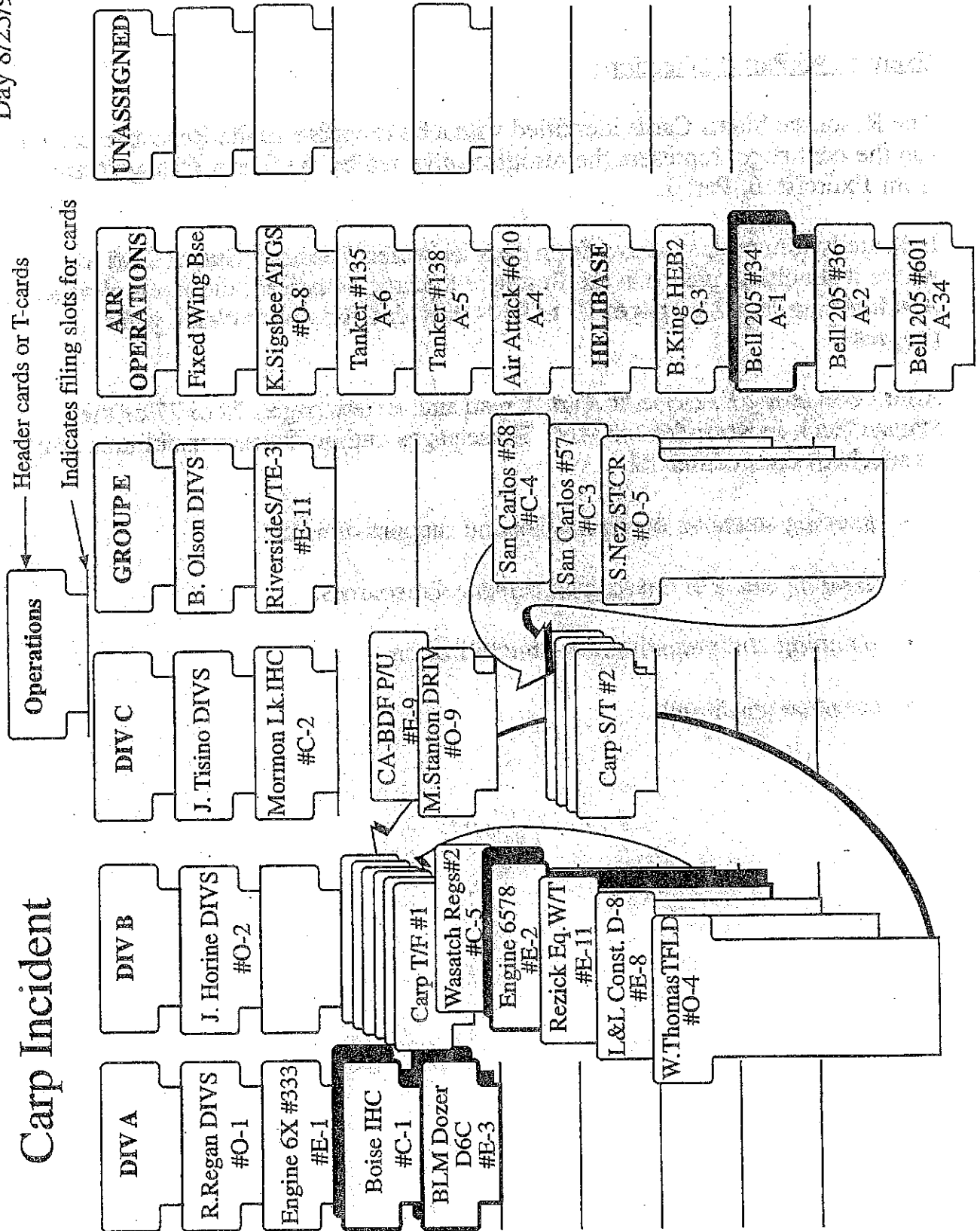
Indicate by drawing an arrow from each identified Resource Status Card to where it should be placed in the Resource Locator to indicate the status change. A solution to Part 2 on pages 97 to 98 is provided for you to check your progress.

After completing Exercise #6 Part 2, read and review pages 70 to 77 of the Status/Check-in Recorder Job Aid. These pages outline the responsibilities of the status/check-in recorder for:

- keeping status on transportation and support vehicles.
- keeping status of unassigned personnel resources.
- planning and preparing for demobilization.
- resource check-out.

# Exercise 6, Part 2

Day 8/25/96





# Exercise Solutions

Figure 1. The effect of the number of trials on the number of correct responses. The number of correct responses was significantly higher than the number of incorrect responses in all cases. The number of correct responses was significantly higher than the number of incorrect responses in all cases. The number of correct responses was significantly higher than the number of incorrect responses in all cases.

**Exercise #1**  
**Status/Check-in Recorder Kit**  
**Solution**

Read page 5 of the Status/Check-in Recorder Job Aid and answer the following questions.

1. What is the purpose of a Status/Check-in Recorder Kit?

The purpose of a Status/Check-in Recorder Kit is to have the necessary items assembled and ready that a status/check-in recorder will need to set up and initially operate a check in station when assigned to an incident. The kit contains reference documents to help a Status/Check-in Recorder do the job and forms to begin recording resource check-in and status tracking.

You may find it helpful to add additional items or assemble a kit to fit your needs. The items for a kit in the Status/Check-in Recorder Job Aid are suggested items and are not absolutely mandatory.

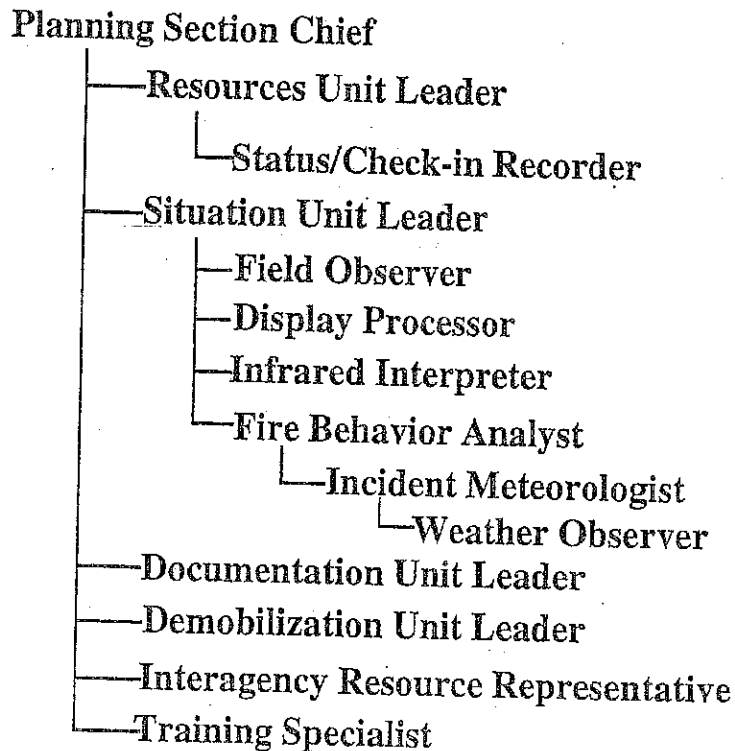


**Exercise #2**  
**Required Check-in Information and Processing**  
**Solution**

Read pages 7 through 12 of the Status/Check-in Recorder Job Aid and answer the following questions.

1. As a Status/Check-in Recorder assigned to a wildland fire incident, who do you work for?

Normally, you will work for the Resources Unit Leader. On less complex incidents you could possibly work for the Planning Section Chief or the Incident Commander. Following is the Incident Command System (ICS) organization chart for the planning section.



2. As a Status/Check-in Recorder, why is it important that you get a briefing or a full explanation of what your duties are from the individual in question #1?

The Resources Unit Leader will normally be your supervisor. You need to know what the Resources Unit Leader wants you to do, how to do it, and where you will be working. You need to know your involvement in the whole incident resources check-in and status keeping process.

3. You are a Status/Check-in Recorder assigned to an incident check-in station or location. Why is it important to record all the necessary information and that the information is accurate when resources are checking in?

The best time to record all the necessary check-in information is during your interview with the resource(s) as they are checking in. This provides you the opportunity to ask questions, get correct spelling of names, accurate information, etc. directly from the individual. It can be difficult and time consuming to get the necessary information after an individual or resource is assigned on the incident.

Recording other qualifications for all personnel allows the incident management team to reallocate resources based on their qualifications as the needs of the incident change.

Recording accurate and complete information at check-in will later assist with efficient demobilization. Incomplete and/or inaccurate information can result in delays in getting resources home or reassigned to another incident.

**Exercise #3**  
**ICS Form 211, Check-in List**  
**Solution**

Read and review as necessary pages 13 through 23 of the Status/Check-in Recorder Job Aid prior to beginning and during completion of Exercise #3. This exercise will provide you the opportunity to record necessary information on ICS Form 211, Check-in List.

Use the following information to complete Exercise #3:

Incident Name.....Carp Fire

Date..... August 23, 1996

Order Number..... CA-BDU-590

Fire Location..... San Bernardino Ranger Unit

California Department of Forestry and Fire Protection

(CDF)

You are the Status/Check-in Recorder assigned to this incident. The following resources are checking in at the incident on August 23rd. Use a blank ICS Form 211 to record and check-in the following resources.

1. At 1630 hours, R. Regan CDF, driving a gasoline powered two wheel drive 1/2 Ton pickup CDF # 6511 from San Bernardino Ranger Unit, home base San Bernardino, Request # O-1, Division/Group Supervisor, also qualified as a Resources Unit Leader arrives. In your interview with R. Regan you find out his last day off was 8/21.

- Is it important to know the last day off for each resource? Why?

**Yes, because it helps incident commanders and agency officials implement Rest and Recuperation (R&R) during incident assignment.**

2. At 1720 hours J. Horine San Bernardino National Forest, driving a gasoline powered USFS, two wheel drive, 1/2 Ton pickup, license # A-698762 from home base, Lytle Creek Ranger District, Request #0-2, Division/Group Supervisor, also qualified as a Planning Section Chief (Type II) arrives. Last day off was 8/21.
3. At 1800 hours a CDF Type 3 two wheel drive, gasoline powered, Engine 6578 from Siskiyou Ranger Unit, homebase Yreka, Captain Jim Smith on Request #E-2 arrives. An interview during the check-in process identified L. Henry and C. Johnson as crew members. Last day off was 8/19.

4. At 1801 hours Engine 333, a Type 6, all wheel drive, diesel powered, from the San Bernardino National Forest, the crew consists of foreman Dave Strong and crew members S. Strong, A. Green, B. Williams, M. Link, and S. Smith on Request #E-1 from their home base of Lytle Creek Ranger District arrive. Last day off was 8/18.

- Is it important to know and document if this engine can be double shifted? Why?

**Yes, so the resources unit will know if the engine can be used for both day and night operational periods.**

In your interview with Dave Strong you found out that S. Strong is qualified as a foreman. M. Link and S. Smith will be crew members for the second operational period and they arrived in a separate all wheel drive, gasoline powered, 3/4 Ton pickup A-445909.

5. At 1810 hours Boise IHC, home base Boise, Idaho, led by Jim Cook with a crew strength of 20, driving USFS diesel powered crew carriers license # A-623541 and license # A-623633 and a gasoline powered two wheel drive pickup license # A-956321 on Request #C-1 arrive. The crew was released from their previous assignment, the Green Horn Fire on the BLM, Bakersfield District with a Request #C-6, at 0800 8/23. Crew weight is 4,817 pounds. Last day off was 8/16.

- Is it important to document the names of the other 19 crew members? Why?

**Yes, because one of the Resource Unit's responsibilities is to document and track all individuals and resources assigned to the Incident. The Resources Unit may be asked to locate individuals in case of emergency situations**

- What is an easy method to obtain the names of the other 19 crew members?

**SF Form 245, Passenger and Cargo Manifest (Crew Manifest). Request a copy from the crew boss. They normally carry extra copies. If they don't have a manifest request the crew boss to complete one for you.**



6. At 1815 hours the Wasatch Regulars #2 from the Wasatch/Cache/Uinta National Forest, home base Salt Lake City, led by Maurice Boren, with a crew strength of 20 in a gasoline powered, two wheel drive, 20 passenger bus, California license # 663A5587 on Request #C-5 arrive. Crew weight is 4,357 pounds. Last day off was 8/22.

- Is it important to know the method of travel for the resource? Why?

Yes, because some resources fly to the closest airport and are transported by ground vehicle(s) to the incident. For demobilization purposes arrangements must be made for air transportation back to their home base.

If resources have their own transportation they may use it for each operational period rather than requiring other transportation arrangements.

In your interview with Maurice Boren you find out that the Wasatch Regulars #2 were flown from Salt Lake City to Ontario Airport.

7. At 1830 hours a D6C dozer from the BLM, California Desert District, home base Riverside, on Request #E-3 with operator M. Jones and swamper B. Flat arrive. Last day off was 8/21.

- What questions do you need to ask the operator and how would you document the information?

Do you have your own transport for the dozer and will it stay at the incident?

Is the dozer equipped with lights?

Is there a relief crew?

What type of blade (cable or hydraulic) does the dozer have and can the blade angle be adjusted?

Is the dozer equipped with a winch or ripper?

After interviewing the operator you find out the transport, I-186512 will stay at the incident, the transport driver's name is B. Quick and is qualified as a relief operator, and the dozer is equipped with lights and a straight blade that can be angled. The District Office can provide a relief swamper if needed. Document this information on the ICS Form 211.

8. At 1930 hours L & L Construction arrives with a D-8 dozer on Request #E-8 from the town of Lake Elsinore. There is only one operator whose name is J. Hancock, no swamper, the dozer has lights and a straight blade that can be angled. The transport must return to town. Last day off was 8/21.
9. At 1945 a 3000 gallon, diesel powered, all wheel drive, water tender with a 350 gpm pump rented from Rezick Equipment arrives. The equipment's home base is San Bernardino, is on Request #E-11, and the operator is S. Craig. Last day off was 8/21.
10. At 2000 hours the Helibase Manager, B. King, informs you that three Bell 205 helicopters arrived at 1400 to the incident. The helicopters are as follows:

San Bernardino National Forest helicopter #34, J. Finnerty pilot from Heap's Peak, Request #A-1. Last day off was 8/18.

San Bernardino National Forest helicopter #36, D. Carter pilot from Del Rosa, Request #A-2. Last day off was 8/19.

San Bernardino Ranger Unit helicopter #601, M. Sanchez pilot from Ryan Field, Request #A-3. Last day off was 8/21

B. King's Request # is O-3 and he's from Tulare Ranger Unit, home base Tulare, and arrived in gasoline powered, two wheel drive, 1/2 Ton pickup CDF # 22398. He's also qualified as Air Support Group Supervisor. Last day off was 8/16.

11. At 2030 hours you receive an ICS Form 213, General Message from the communications unit stating Air Tactical Group Supervisor, K. Sigsbee, San Bernardino National Forest, flying in Air Attack 610 (Cessna 340), Request #A-4, pilot's name U. Turn from Ryan Field were assigned to the incident at 1400. The pilot's last day off was 8/20. Two Type II air tankers from Ryan Field, San Bernardino National Forest #138 (DC-6) and #135 (P2V), Request #s A-5 and A-6, with their last day off being 8/20, were assigned to the incident at 1400.

- Since the General Message Form did not give you all the necessary information to check Sigsbee in, how would you obtain the missing information?

**Inform the Resources Unit Leader of missing information regarding Sigsbee. The Resources Unit Leader may obtain the missing information or instruct you to obtain it through the incident ordering manager or local dispatch.**

Upon checking with the ordering manager you learn Sigsbee's request # is O-8 and he is from the San Bernardino National Forest Supervisor's Office. He has his own transportation, a two wheel drive, gasoline powered, sedan, license # A537695 and is qualified as a fireline blaster. Last day off was 8/20.

12. At 2100 a gasoline powered, all wheel drive, 3/4 ton pickup, license # A-697548 from the San Bernardino National Forest based at San Bernardino arrived on Request #E-9. The vehicle is driven by Mary Stanton and her request # is O-9. Last day off was 8/21.
13. At 2115 two BIA crews from San Carlos Agency, Arizona arrive by motor coach. The crews are San Carlos #57 with 20 persons, Crew Boss - R. Clayton, crew weight 4135 lbs. and San Carlos #58 with 19 persons, Crew Boss B. Pahe, crew weight 4367 lbs. Their request #'s are C-3 and C-4. The Crew Representatives are M. Thorn and C. Smith from the Coronado National Forest. Their home base is Safford, Arizona. The motor coach will not stay with the crews. Last day off was 8/22. You learned from your interview that the Crew Representatives had their last day off on 8/21.

14. At 2200 CDF Captain Barry Olsen driving a CDF gasoline powered, all wheel drive, 1/2 Ton pickup, license # 432K1689 arrived with a Strike Team of Type 3 CDF two wheel drive engines out of Riverside Ranger Unit. His request # is E-11. Captain Olsen's home base is Beaumont, but he left Perris Headquarters at the time of dispatch to the incident. His other ICS qualification is Division/Group Supervisor. Last day off was 8/13. The engines in the strike team are:

6186 Engineer John Smith plus B. Day and J. Moore from Anza Station. They departed for the incident from Beaumont. Last day off was 8/19.

6178 Captain Brad Eaton plus F. Dill and T. Green from Elsinore Station. They departed for the incident from Beaumont. Last day off was 8/19.

6177 Engineer Marvin Craig plus D. Black and C. Gray from Temecula Station. They departed for the incident from Sunnymead. Last day off was 8/16.

6190 Captain Claude Johnson plus G. Smith and S. Jones from Hemet Station. They departed for the incident from Sunnymead. Last day off was 8/16.

6176 Engineer Brian Gumble plus M. Gaylord and P. Thompson from Perris Station. They departed for the incident from Highgrove. Last day off was 8/20.

Captain Olsen said that engine 6190 was a diesel engine and all others were gasoline engines.

Since the information about this Strike Team of Engines can not be captured on the 'T' card Resource Status Card, how would you document this information?

**By filling out or having the resource leader fill out a SF 245 Passenger and Cargo Manifest.**

15. At 2305 hours Strike Team Leaders (crew) W. Thomas, Request #O-4, and S. Nez Request #O-5 arrive. They drove together in a gasoline powered, all wheel drive, 3/4 Ton pickup, license # I-165847 from the Ft. Apache Agency in Whiteriver, Arizona. Both are also qualified as Task Force Leaders and their last day off was 8/21.
16. At 2355 the Mormon Lake IHC from the Coconino National Forest in Flagstaff, Arizona arrive. They flew by Convair to the Ontario Airport and were transported to the incident base. Crew needs ground transportation while on this Incident. You learned from your interview that the Crew Superintendent is a qualified Division/Group Supervisor and the Crew Foreman is a qualified Emergency Medical Technician 1. Refer to the Crew Manifest on page 21 of the Status/Check-in Recorder Job Aid for any additional information needed for check-in. Last day off was 8/22.

CHECK-IN LIST				1. INCIDENT NAME CARP (CA-BDU-590)		2. CHECK IN LOCATION <input checked="" type="checkbox"/> BASE <input type="checkbox"/> CAMP		3. DATE/TIME 08/23/96 1630					
				<input type="checkbox"/> STAGING AREA <input type="checkbox"/> ICP RESTAT <input type="checkbox"/> HELIBASE									
<b>CHECK-IN INFORMATION</b>													
4. LIST PERSONNEL (OVERHEAD) BY AGENCY & NAME -OR- LIST EQUIPMENT BY THE FOLLOWING FORMAT: AGENCY SINGL E TIF KIND TYPE I.D. NO./NAME	5. ORDER/ REQUEST	6. DATE/TIME CHECK-IN	7. LEADER'S NAME	8. TOTAL NO. PERSONNEL	9. MANIFEST YES/NO	10. CREW WEIGHT OR INDIVIDUALS WEIGHT	11. HOME	12. DEPARTURE POINT	13. METHOD OF TRAVEL	14. INCIDENT ASSIGNMENT	15. OTHER QUALIFICATION	16. SENT TO RESTAT TIME/INT.	LAST DAY OFF
CA BDU R. REGAN	O-1	8/23 1630		1	X		SAN BERNADINO	4X2 1/2 TPU 6511	DIVS	GAS RESL	8/23 1700 JBN	8/21	
CA BDF J. HORINE	O-2	8/23 1720		1	X		LYTLE CK RAN. DIST	4X2 1/2 TPU A-698762	DIVS	GAS PSC2	8/23 1730 JBN	8/21	
CA SKU	E-2	8/23 1800	JIM SMITH	3	X		YREKA, CA			GAS	8/23 1845 JBN	8/19	
CA BDF	E-1	8/23 1801	L. HENRY C. JOHNSON	6	X		LYTLE CK RAN. DIST			ENGINE DIESEL	8/23 1845 JBN	8/18	
"	Crew Members		A. GREEN B. WILLIAMS				"			PICK UP GAS		8/18	
"	Relief Engine Operator		S. STRONG				"		4X4 3/4 TPU A-445909	ENGINE DOUBLE SHIFTED		8/18	
"	Crew Members		M. LINK S. SMITH				"		A-62354			8/18	
ID BOF	C-1	8/23 1810	J. COOK	20	X	4817	BOISE	BBD GREENHORN A-623633 FIRE (C-6)	A-62354	DIESEL	8/23 1845 JBN	8/16	
UT WCF	C-5	8/23 1815	M. BOREN	20	X	4357	SALT LAKE	SALT LAKE	AIR	GAS	8/23 1845 JBN	8/22	
CA CDD	E-3	8/23 1830	M. JONES	3	X		RIVERSIDE	RIVERSIDE	BUS 6X2 A-6635587 FROM ONTARIO AIRPORT	GAS	8/23 1845 JBN	8/21	
"	Swamper		B. FLAT				"	"	LOWBOY TRANSPORT F-186312	DIESEL	8/23 1845 JBN		
"							"	"		HAS LIGHTS ADJUSTABLE STRAIGHT BLADE			
"	Driver		B. QUICK							RELIEF OPERATOR			
17. Page 1 of 3										18. PREPARED BY (NAME AND POSITION) JB NIMBLE, SCRN			

CHECK-IN LIST										2. CHECK IN LOCATION				3. DATE/TIME													
1. INCIDENT NAME CARP (CA-BDU-590)										<input checked="" type="checkbox"/> BASE <input type="checkbox"/> CAMP <input type="checkbox"/> STAGING AREA <input type="checkbox"/> ICP RESTAT <input type="checkbox"/> HELIBASE				08/23/96 1930													
<b>CHECK-IN INFORMATION</b>																											
4. LIST PERSONNEL (OVERHEAD) BY AGENCY & NAME - OR										9.		10.		11.		12.		13.		14.		15.		16.			
LIST EQUIPMENT BY THE FOLLOWING FORMAT:										TOTAL NO. PERSONNEL		MANIFEST		CREW WEIGHT OR NO. INDIVIDUALS		HOME BASE		DEPARTURE POINT		METHOD OF TRAVEL		INCIDENT ASSIGNMENT		OTHER QUALIFICATION		SENT TO RESTAT TIME/INT.	
AGENCY	SINGLE	KIND	TYPE	ID. NO./NAME	ORDER/ REQUEST NUMBER	DATE/TIME CHECK-IN	LEADER'S NAME	YES	NO	YES	NO	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT	WEIGHT
CA	PVT	D	1	L & L CONSTRUCTION	E-8	8/23 1930	J. HANCOCK	1		X																	
CA	PVT	WT	2	REZICK EQUIP.	E-11	8/23 1945	S. CRAIG	1		X																	
CA	TUJ	B. KING			O-3	8/23 2000		1		X																	
CA	BDF	H	2	BELL 205 #34	A-1	8/23 2000	J. FINNERTY	1		X																	
CA	BDF	H	2	BELL 205 #36	A-2	8/23 2000	D. CARTER	1		X																	
CA	BDU	H	2	BELL 205 #601	A-3	8/23 2000	M. SANCHEZ	1		X																	
CA	BDF	A	2	#138	A-5	8/23 2030				X																	
CA	BDF	A	2	#135	A-6	8/23 2030				X																	
CA	BDF	K. SIGSBEE			O-8	8/23 2030		1		X																	
CA	BDF	A		#610	A-4	8/23 2030	U. TURN			X																	
CA	BDF	M. STANTON			O-9	8/23 2100		1		X																	
CA	BDF	PU		4X4 3/4T PU A-697548	E-9	8/23 2100	M. STANTON (O-9)																				
AZ	SCA	C	2	SAN CARLOS #57	C-3	8/23 2115	R. CLAYTON	20	X			4135															
AZ	CNF				"	"	M. THORN	1	X																		
AZ	SCA	C	2	SAN CARLOS #58	C-4	"	B. PAHE	19	X			4367															
AZ	CNF				"	"	C. SMITH	1	X																		
17. Page 2 of 3																18. PREPARED BY (NAME AND POSITION)		JB NIMBEL, SCKN									
17. Page 2 of 3																18. PREPARED BY (NAME AND POSITION)		JB NIMBEL, SCKN									

CHECK-IN LIST										1. INCIDENT NAME CARP (CA-800-590)		2. CHECK IN LOCATION <input checked="" type="checkbox"/> XASE <input type="checkbox"/> CAMP		3. DATE/TIME 08/23/96 2115																					
CHECK-IN INFORMATION										<input type="checkbox"/> STAGING AREA <input type="checkbox"/> ICP RESTAT <input type="checkbox"/> HELIBASE																									
4. LIST PERSONNEL (OVERHEAD) BY AGENCY & NAME - OR										5.		6.		7.		8.		9.		10.		11.		12.		13.		14.		15.		16.			
LIST EQUIPMENT BY THE FOLLOWING FORMAT:										ORDER/REQUEST NUMBER		DATE/TIME CHECK-IN		LEADER'S NAME		TOTAL NO. PERSONNEL		MANIFEST YES		NO		CREW WEIGHT FOR INDIVIDUALS		HOME BASE		DEPARTURE POINT		METHOD OF TRAVEL		INCIDENT ASSIGNMENT		OTHER QUALIFICATION		SENT TO RESTAT TIME/INT.	
I.D. NO./NAME										TYPE		KIND		SINGLE		S/T																			
RRU	ST	E	3	RIVERSIDE	E-11	8/23/2000	B. OLSEN	16	X		BEAUMONT HEADQTRS.	4X4 J2T PU 432K1689	STEN	(GAS) DIVS	8/23 JBN	8/13	8/19																		
"	"	"	"	6186	"	CREW	J. SMITH	"	NEEDS MANIFEST TO IDENTIFY CREW MEMBERS		BEAUMONT				8/23 JBN	8/19																			
"	"	"	"	6178	"	CREW	B. DAY	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"	6177	"	CREW	J. MOORE	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"	6190	"	CREW	B. EATON	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"		"	CREW	EDILL T. GREEN	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"		"	CREW	M. CRAIG	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"		"	CREW	D. BLACK	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"		"	CREW	C. JOHNSON	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"		"	CREW	G. SMITH	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"		"	CREW	B. GUMBLE	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"		"	CREW	M. GAYLORD	"			BEAUMONT				8/23 JBN	8/16																			
"	"	"	"		"	CREW	P. THOMPSON	"			BEAUMONT				8/23 JBN	8/16																			
FTA	W. THOMAS				O-4	8/23/2305		1	X		WHITERIVER WHITERIVER	4X4 3/4T PU 165847	STLC	(GAS) TFLD	8/23 JBN	8/21																			
FTA	SNEZL				O-5	8/23/2305		1	X		WHITERIVER WHITERIVER	"	STLC	TFLD	8/23 JBN	8/21																			
COF					C-2	8/23/2355	JESSE H. SNO	20	X		FLAGSTAFF FLAGSTAFF	AIR	DIVS	8/24 0030	8/22																				
											NEEDS TRANSPORT		R. COPP-EMT1																						

17. Page 3  
 18. PREPARED BY (NAME AND POSITION) JTB NIMBEL, SCAN  
 USE BACK FOR REMARKS OR COMMENTS



## Exercise #4 ICS Form 219, Resource Status Card

Read and review the Status/Check-in Recorder Job Aid pages 25 through 58 prior to beginning this exercise. This exercise will provide you the opportunity to transfer necessary information from ICS Form 211, Check-in List to the appropriate ICS Form 219, Resource Status Card (T-Card).

### Exercise #4 Directions:

Transfer the necessary information for each resource identified in items 1-16 of Exercise #3 to the appropriate ICS Form 219, Resource Status Card (T-Card); i.e., ICS Form 219-2 Crew, ICS Form 219-3 Engine, ICS Form 219-4 Helicopter, ICS Form 219-5 Personnel, ICS Form 219-6 Aircraft, and ICS Form 219-7 Dozer.

# From Exercise #3, Item #1 (R. Regan Status Card)

AGENCY <i>CA</i> <i>BDU</i>	NAME <i>R. REGAN</i>	INCIDENT ASSIGNMENT <i>DIVS</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-1</i>	DATE/TIME CHECK IN <i>8/23</i> <i>1630</i>	
HOME BASE <i>San Bernardino</i>		
DEPARTURE POINT <i>San Bernardino</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <i>4X2 1/2 TPU 6511 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	WEIGHT	
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED	DATE/TIME CONFIRMED	
DESTINATION POINT	ETA	
REMARKS (includes other qualifications) <i>RESL</i> <i>Last Day Off 8/21</i>		
INCIDENT LOCATION <i>ICP</i>	TIME <i>8/23</i> <i>1700</i>	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

ICS 219-5 (Rev. 4/82) PERSONNEL

Front

AGENCY	NAME	INCIDENT ASSIGNMENT
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

From Exercise #3, Item #2 (J. Horine Status Card)

AGENCY <i>CA</i> <i>BDF</i>	NAME <i>J. HORINE</i>	INCIDENT ASSIGNMENT <i>DIVS</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-2</i>		DATE/TIME CHECK IN <i>8/23</i> <i>1720</i>
HOME BASE <i>LYTLE CREEK</i> <i>RANGER DISTRICT</i>		
DEPARTURE POINT <i>LYTLE CREEK</i> <i>RANGER DISTRICT</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR OTHER <i>4X2 1/2 TPU A-698762 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (includes other qualifications) <i>PSC2</i> <i>Last Day Off 8/21</i>		
INCIDENT LOCATION <i>ICP</i>		TIME <i>8/23</i> <i>1800</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

ICS 219-5 (Rev. 4/82) PERSONNEL

Front

AGENCY	NAME	INCIDENT ASSIGNMENT
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

# From Exercise #3, Item #3 (Type 3 Engine From Yreka)

AGENCY <i>CA</i> <i>SKU</i>	ST TF	KIND <i>E</i>	TYPE <i>3</i>	I.D. NO. <i>6578</i>
ORDER/REQUEST NO. <i>CA-BD11-590</i> <i>E-2</i>		DATE/TIME CHECK IN <i>8-23/1300</i>		
HOME BASE <i>Yreka, California</i>				
DEPARTURE POINT <i>Yreka, California</i>				
LEADER NAME <i>Jim Smith</i>				
RESOURCE I.D. NO./NAMES <i>Crewmembers</i> <i>E. Henry</i> <i>C. Johnson</i>				
DESTINATION POINT				ETA
REMARKS <i>Gasoline Powered</i> <i>Last Day Off 8/19</i>				
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
ICS 219-3 (Rev. 4/82) ENGINE				

Front

AGENCY	ST TF	KIND	TYPE	I.D. NO./NAME
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

From Exercise #3, Item #4 (Engine 333 From San Bernardino N.F.)

AGENCY <i>CA</i> <i>BDF</i>	ST TF	KIND <i>E</i>	TYPE <i>6X</i>	I.D. NO. <i>333</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-1</i>		DATE/TIME CHECK IN <i>8-23</i> <i>1801</i>		
HOME BASE <i>Lytle Creek Ranger District</i>				
DEPARTURE POINT <i>Lytle Creek Ranger District</i>				
LEADER NAME <i>D. Strong</i>				
RESOURCE I.D. NO./NAMES <i>Crewmembers - A. Green, B. Williams</i> <i>S. Strong - Relief Foreman</i> <i>Crewmembers - M. Link, S. Smith</i>				
DESTINATION POINT				ETA
REMARKS <i>Diesel Powered</i> <i>Last Day Off 8/18</i>				
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>Extra Vehicle - Gas</i> <i>4X2 3/4T PU A-445909</i>				

ICS 219-3 (Rev. 4/82) ENGINE

Front

AGENCY	ST TF	KIND	TYPE	I.D. NO./NAME
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

AGENCY <i>ID</i> <i>BOF</i>	ST TF	KIND <i>C</i>	TYPE <i>1</i>	I.D. NO. <i>Boise IHC</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-1</i>		DATE/TIME CHECK IN <i>8-23</i> <i>1810</i>		
HOME BASE <i>Boise, Idaho</i>				
DEPARTURE POINT <i>BBD - Green Horn Fire (C-6)</i>				
LEADER NAME <i>J. Cook</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS)				
NO. PERSONNEL <i>20</i>		MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,817</i>
METHOD OF TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Carriers A-623541, A-623633(diesel)</i> <i>4X2 1/2T D91 A-956321 (gas)</i>				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Released from Green Horn Fire 8/23@ 0800</i> <i>Last Day Off 8/16</i>				

Front.

AGENCY <i>ID BOF</i>	ST	TF	KIND <i>C</i>	TYPE <i>1</i>	I.D. NO./NAME <i>Boise IHC</i>
INCIDENT LOCATION <i>ICP</i>					TIME <i>8/23 1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

**Back**

From Exercise #3, Item #6 (Wasatch Regulars #2)

AGENCY <i>UT</i> <i>WCF</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	I.D. NO. <i>Wasatch</i> <i>Reg #2</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-5</i>		DATE/TIME CHECK IN <i>8-23</i> <i>1815</i>		
HOME BASE <i>Salt Lake City, UT</i>				
DEPARTURE POINT <i>Salt Lake City, UT</i>				
LEADER NAME <i>M. Boren</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS)				
NO. PERSONNEL <i>20</i>		MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,357</i>
METHOD OF TRAVEL <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input checked="" type="checkbox"/> AIR				
OTHER				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Flew to Ontario - 6X2 Bus</i> <i>Lic #663A5587 Assigned.</i> <i>Last Day Off 8/22</i>				

Front

AGENCY <i>UT</i> <i>WCF</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	I.D. NO./NAME <i>Wasatch</i> <i>Reg #2</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

# From Exercise #3, Item #7 (D6C Dozer)

AGENCY <i>CA</i> <i>CDD</i>	ST	TF	KIND <i>D</i>	TYPE <i>2</i>	I.D. NO. <i>BLM D6C</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-3</i>		DATE/TIME CHECK IN <i>8-23</i> <i>1830</i>			
HOME BASE <i>Riverside, CA</i>					
DEPARTURE POINT <i>Riverside, CA</i>					
LEADER NAME <i>M. Jones</i>					
RESOURCE ID. NO./NAMES <i>B. Flat - Swamper</i>					
<i>B. Quick - Transport Driver/</i>					
<i>Relief Operator</i>					
DESTINATION POINT					ETA
REMARKS <i>Has Lights and Adjustable Straight Blade</i> <i>Lowboy Transport I-186512 is Assigned</i>					
INCIDENT LOCATION <i>ICP</i>					TIME <i>8/23</i> <i>1900</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE <i>Last Day Off 8/21</i>					

ICS 213-7 (Rev. 4/82) DOZERS NFES 1349

Front

AGENCY	ST	TF	KIND	TYPE	I.D. NO./NAME
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

Back



From Exercise #3, Item #8 (L&L Construction Dozer)

AGENCY <i>CA-PWT</i>	ST	TF	KIND <i>D</i>	TYPE <i>1</i>	ID NO. <i>L&amp;L Construction</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-8</i>		DATE/TIME CHECK IN <i>8-23</i> <i>1930</i>			
HOME BASE <i>Lake Elsinore</i>					
DEPARTURE POINT <i>Lake Elsinore</i>					
LEADER NAME <i>J. Hancock</i>					
RESOURCE ID, NO, S/NAMES <i>D-8</i>					
DESTINATION POINT					ETA
REMARKS <i>Diesel Powered, Fixed Straight Blade, Has Lights, and Last Day Off 8/21</i>					
INCIDENT LOCATION <i>ICP</i>					TIME <i>8/23</i> <i>2000</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE <i>No Swanper Assigned Transport Returned to Home Base</i>					

Front

AGENCY	ST	TF	KIND	TYPE	ID, NO, NAME
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

Back

# From Exercise #3, Item #9 (3,000 Gallon Water Tender)

AGENCY <i>CA</i> <i>PVT</i>	ST TF	KIND <i>WT</i>	TYPE <i>2</i>	I.D. NO. <i>Rezick</i> <i>Equipment</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-11</i>		DATE/TIME CHECK IN <i>8/23 1945</i>		
HOME BASE <i>San Bernardino</i>				
DEPARTURE POINT <i>Same</i>				
LEADER NAME <i>S. Craig</i>				
RESOURCE I.D. NO.S/NAMES				
DESTINATION POINT				ETA
REMARKS <i>3,000 gal. diesel with 350gpm pump</i> <i>Last Day Off 8/21</i>				
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>2000</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
ICS 213-B (Rev. 4/82) MISC. EQUIP. TASK FORCE				

Front

AGENCY	ST TF	KIND	TYPE	I.D. NO./NAME
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

From Exercise #3, Item #10 (B. King HEB2)

AGENCY <i>CA</i> <i>BDU</i>	NAME <i>B. KING</i>	INCIDENT ASSIGNMENT <i>HEB2</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-3</i>		DATE/TIME CHECK IN <i>8/23</i> <i>1630</i>
HOME BASE <i>Tulare</i>		
DEPARTURE POINT <i>Tulare</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <i>4X2 1/2t TPU CDF #22398 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (includes other qualifications) <i>ASGS</i> <i>Last Day Off 8/16</i>		
INCIDENT LOCATION <i>ICP</i>		TIME <i>8/23</i> <i>1700</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
ICS 219-5 (Rev. 4/82) PERSONNEL		

Front

AGENCY	NAME	INCIDENT ASSIGNMENT
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

# From Exercise #3, Item #10 (Helicopter #34)

AGENCY <i>CA-BDF</i>	TYPE <i>2</i>	MANUFACTURER <i>BELL 205</i>	I.D. NO. <i>#34</i>
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ORDER/REQUEST <i>CA-BDU-590 A-1</i>	DATE/TIME CHECK IN <i>8/23 2000</i>
HOME BASE <i>Heap's Peak</i>	
DEPARTURE POINT <i>Heap's Peak</i>	
PILOT NAME <i>J. Finnerty</i>	
DESTINATION POINT	ETA
REMARKS	
INCIDENT LOCATION <i>Helibase</i>	TIME <i>8/23 1400</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR	
NOTE <i>Last Day Off 8/18</i>	
INCIDENT LOCATION	TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR	
NOTE	

ICS 219-4 (4/82) HELICOPTER

Front

AGENCY	TYPE	MANUFACTURER	I.D. NO.
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INCIDENT LOCATION	TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR	
NOTE	
INCIDENT LOCATION	TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR	
NOTE	
INCIDENT LOCATION	TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR	
NOTE	

U.S. GPO: 1988-594-771

NFES 1346

Back

From Exercise #3, Item #10 (Helicopter #36)

AGENCY <i>CA-BDF</i>	TYPE <i>2</i>	MANUFACTURER <i>BELL 205</i>	ID. NO. <i>#36</i>
ORDER/REQUEST <i>CA-BDU-590</i> <i>A-2</i>		DATE/TIME CHECK IN <i>8/23 2000</i>	
HOME BASE <i>Del Rosa</i>			
DEPARTURE POINT <i>Del Rosa</i>			
PILOT NAME <i>D. Carter</i>			
DESTINATION POINT			ETA
REMARKS			
INCIDENT LOCATION <i>Helibase</i>			TIME <i>8/23</i> <i>1400</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE <i>Last Day Off 8/19</i>			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

IOS 219-4 (4/82) HELICOPTER

Front

AGENCY	TYPE	MANUFACTURER	ID. NO.
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

U.S. GPO: 1988-594-771 NFFS 1348

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# From Exercise #3, Item #10 (Helicopter #601)

AGENCY <i>CA-BDU</i>	TYPE <i>2</i>	MANUFACTURER <i>BELL 205</i>	I.D. NO. <i>#601</i>
ORDER/REQUEST <i>CA-BDU-590</i> <i>A-3</i>		DATE/TIME CHECK IN <i>8/23 2000</i>	
HOME BASE <i>Ryan Field</i>			
DEPARTURE POINT <i>Ryan Field</i>			
PILOT NAME <i>M. Sanchez</i>			
DESTINATION POINT			ETA
REMARKS			
INCIDENT LOCATION <i>Helibase</i>			TIME <i>8/23</i> <i>1400</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE <i>Last Day Off 8/21</i>			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

ICS 219-4 (4/82) HELICOPTER

Front

AGENCY	TYPE	MANUFACTURER	I.D. NO.
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

U.S. GPO: 1996-354-771 NFB-1996

Back

From Exercise #3, Item #11 (Sigsbee, ATGS)

AGENCY <i>CA</i> <i>BDF</i>	NAME <i>K. Sigsbee</i>	INCIDENT ASSIGNMENT <i>ATGS</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-8</i>		DATE/TIME CHECK IN <i>8/23</i> <i>2030</i>
HOME BASE <i>San Bernardino</i>		
DEPARTURE POINT <i>San Bernardino</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <i>Sedan A-537695</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (includes other qualifications) <i>FLEB</i> <i>Last Day Off 8/20</i>		
INCIDENT LOCATION <i>Fixed Wing Base</i> <i>Ryan Field</i>		TIME <i>8/23</i> <i>1700</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Front

AGENCY	NAME	INCIDENT ASSIGNMENT
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

# From Exercise #3, Item #11 (Air Attack 610)

AGENCY <i>CA</i> <i>BDF</i>	TYPE	MANUFACTURER <i>Cessna 340</i>	I.D. NO. <i>#610</i>
ORDER/REQUEST <i>CA-BDU-590</i> <i>A-4</i>		DATE/TIME CHECK IN <i>8/23 2030</i>	
HOME BASE <i>Ryan Field</i>			
DATE/TIME RELEASED			
INCIDENT LOCATION <i>Fixed Wing Base</i> <i>Ryan Field</i>			TIME <i>8/23</i> <i>1400</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE <i>Pilot - U. Turn</i> <i>Last Day Off 8/20</i>			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION			TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

ICS 219.6 (4/82) AIRCRAFT

Front

AGENCY	TYPE	MANUFACTURER	I.D. NO.
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

U.S. GPO: 1988-594-771 NFES 1348

Back



From Exercise #3, Item #11 (Air Tanker 138)

AGENCY <i>CA</i> <i>BDT</i>	TYPE <i>2</i>	MANUFACTURER <i>DC-6</i>	I.D. NO. <i>#138</i>
ORDER/REQUEST <i>CA-BDU-590</i> <i>A-5</i>		DATE/TIME CHECK IN <i>8/23 2030</i>	
HOME BASE <i>Ryan Field</i>			
DATE/TIME RELEASED			
INCIDENT LOCATION <i>Fixed Wing Base</i> <i>Ryan Field</i>		TIME <i>8/23</i> <i>1400</i>	
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE <i>Last Day Off 8/20</i>			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

ICS 219-6 (4/82) AIRCRAFT

Front

AGENCY	TYPE	MANUFACTURER	I.D. NO.
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

U.S. GPO: 1988-594-771 NFES 1348

Back

# From Exercise #3, Item #11 (Air Tanker 135)

AGENCY <i>CA</i> <i>BDT</i>	TYPE <i>2</i>	MANUFACTURER <i>P2V</i>	I.D. NO. <i>#135</i>
ORDER/REQUEST <i>CA-BDU-590</i> <i>A-6</i>		DATE/TIME CHECK IN <i>8/23 2030</i>	
HOME BASE <i>Ryan Field</i>			
DATE/TIME RELEASED			
INCIDENT LOCATION <i>Fixed Wing Base</i> <i>Ryan Field</i>		TIME <i>8/23</i> <i>1400</i>	
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE <i>Last Day Off 8/20</i>			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

Front

AGENCY	TYPE	MANUFACTURER	I.D. NO.
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

Back

From Exercise #3, Item #12 (Stanton)

AGENCY <i>CA</i> <i>BDF</i>	NAME <i>M. STANTON</i>	INCIDENT ASSIGNMENT <i>DRIV</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-9</i>		DATE/TIME CHECK IN <i>8/23</i> <i>2100</i>
HOME BASE <i>San Bernardino</i>		
DEPARTURE POINT <i>San Bernardino</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <i>4X4 3/4T PU A-697548 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (includes other qualifications)		
INCIDENT LOCATION <i>Ground Support</i>		TIME <i>8/23</i> <i>2130</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE <i>Last Day Off 8/21</i> <i>PU Has Request #E-9</i>		

Front

AGENCY	NAME	INCIDENT ASSIGNMENT
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

# From Exercise #3, Item #12 (Pickup)

AGENCY <i>CA</i> <i>BDF</i>	ST TF	KIND <i>PU</i>	TYPE	I.D. NO. <i>A-697548</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-9</i>		DATE/TIME CHECK IN <i>8/23 2100</i>		
HOME BASE <i>San Bernardino</i>				
DEPARTURE POINT <i>Same</i>				
LEADER NAME <i>M. Stanton (O-9)</i>				
RESOURCE I.D. NO.S/NAMES				
DESTINATION POINT				ETA
REMARKS <i>4X4 3/4T Gas Pickup</i>				
INCIDENT LOCATION <i>Ground Support</i>				TIME <i>8/23 2130</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
ICS 218-B (Rev. 4/82) MISC. EQUIP./TASK FORCE				

Front

AGENCY	ST TF	KIND	TYPE	I.D. NO./NAME
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

From Exercise #3, Item #13 (San Carlos #58 Handcrew)

AGENCY <i>AZ</i> <i>SCA</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	ID. NO. <i>San Carlos</i> <i>#58</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-4</i>		DATE/TIME CHECK IN <i>8-23</i> <i>2115</i>		
HOME BASE <i>San Carlos</i>				
DEPARTURE POINT <i>San Carlos</i>				
LEADER NAME <i>B. Pafie</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS) <i>CREP - C. Smith - AZ-CNF</i>				
<i>Home Base Safford, AZ</i>				
<i>Last Day Off 8/21</i>				
NO. PERSONNEL <i>20</i>	MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,367</i>	
METHOD OF TRAVEL <input type="checkbox"/> OWN <input checked="" type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Motor Coach Returned Home</i>				
DESTINATION POINT			ETA	
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Crew's Last Day Off 8/22</i>				

ICS 219-2 (Rev. 4/82) CREW NFES 1344

Front

AGENCY <i>AZ</i> <i>SCA</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	ID. NO./NAME <i>San Carlos</i> <i>#58</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>2130</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

From Exercise #3, Item #13 (San Carlos #57 Handcrew)

AGENCY <i>AZ</i> <i>SCA</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	I.D. NO. <i>San Carlos</i> <i>#57</i>
ORDER/REQUEST NO. <i>CA-BD11-590</i> <i>C-3</i>		DATE/TIME CHECK IN <i>8-23</i> <i>2115</i>		
HOME BASE <i>San Carlos</i>				
DEPARTURE POINT <i>San Carlos</i>				
LEADER NAME <i>R. Clayton</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS) <i>CRFP - M. Thorn - AZ-CNF</i>				
<i>Home Base Safford, AZ</i>				
<i>Last Day Off 8/21</i>				
NO. PERSONNEL <i>20</i>		MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,135</i>
METHOD OF TRAVEL <input type="checkbox"/> OWN <input checked="" type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Motor Coach Returned Home</i>				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Crew's Last Day Off 8/22</i>				

ICS 219-2 (Rev. 4/82) CREW NFES 1944

Front

AGENCY <i>AZ</i> <i>SCA</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	I.D. NO./NAME <i>San Carlos</i> <i>#57</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>2130</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

From Exercise #3, Item #14 (CDF Engine Strike Team)

AGENCY <i>CA</i> <i>RRU</i>	ST <i>ST</i>	KIND <i>E</i>	TYPE <i>3</i>	I.D. NO. <i>Riverside</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-11</i>		DATE/TIME CHECK IN <i>8-23/2200</i>		
HOME BASE <i>See Below</i>				
DEPARTURE POINT <i>See Below</i>				
LEADER NAME <i>B. Olsen, HB - Beaumont DP - Perris</i>				
RESOURCE I.D. NO.S/NAMES <i>6186-Smith +2, HB Anza, DP Beaumont</i> <i>6178-Eaton +2, HB Elsonore, DP Beaumont</i> <i>6177-Craig +2, HB Temecula, DP Sunnymead</i> <i>6190-Johnson +2, HB Hemet, DP Sunnymead</i> <i>6176-Gumble +2, HB Perris, DP Highgrove</i>				
DESTINATION POINT				ETA
REMARKS <i>Eng 6190 Diesel All Others Gas</i> <i>See Manifest For Crewmember</i> <i>Names and Last Day Off</i>				
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>2330</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>B. Olsen has 4X4 1/2 TPU #432K1689 Gas</i> <i>B. Olsen is DIVS Qualified</i>				

Front

AGENCY	ST	TF	KIND	TYPE	I.D. NO./NAME
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

Back

# From Exercise #3, Item #14 (CDF Engine Strike Team Manifest)

STANDARD FORM 245 (6-77)  
Prescribed by  
USDA FSM 5716  
USD I MP9400.51B

NO OF PASSENGERS  
ON THIS PAGE 16

PAGE 1 OF 1

## PASSENGER AND CARGO MANIFEST

PROJECT NO.

ORDERING UNIT  
**CA-BDU-590 (E-11)**  
NAME OF CARRIER

PROJECT NAME  
**CARP**

**Riverside Eng ST**

MODE OF TRANSPORTATION & I.D. NO.

PILOT OR DRIVER

**Ground (CDF)**

IF DELAYED, CONTACT

CHIEF OF PARTY

REPORT TO:

**SWCC 505-842-3473**

**B. Olsen**

DEPARTURE

INTERMEDIATE STOPS

DESTINATION

Place

ETD

ETA

Place

ETD

ETA

Place

Last Day Off

PASSENGER AND OR CARGO NAME			M	F	PASSENGER WEIGHT	CARGO WEIGHT	DUTY ASGMT. IF APPLICABLE	HOME UNIT
1.	B. Olsen		X				STEN	Beaumont 8/13
2.								
3.	6186 J. Smith		X				ENGB	Anza 8/19
4.	B. Day			X			CREW	Anza 8/19
5.	J. Moore		X				CREW	Anza 8/19
6.								
7.	6178 B. Eaton		X				ENGB	Elsinore 8/19
8.	F. Dill			X			CREW	Elsinore 8/19
9.	T. Green		X				CREW	Elsinore 8/19
10.								
11.	6177 M. Craig		X				ENGB	Temecula 8/16
12.	D. Black		X				CREW	Temecula 8/16
13.	C. Gray			X			CREW	Temecula 8/16
14.								
15.	6190 C. Johnson		X				ENGB	Hemet 8/16
16.	G. Smith		X				CREW	Hemet 8/16
17.	S. Jones			X			CREW	Hemet 8/16
18.								
19.	6176 B. Gumble		X				ENGB	Perris 8/20
20.	M. Gaylord			X			CREW	Perris 8/20
21.	P. Thompson			X			CREW	Perris 8/20
22.								
SIGNATURE OF AUTHORIZED REPRESENTATIVE <i>J. B. Nimble</i>								DATE 8/23/96



From Exercise #3, Item #15 (STCR Nez)

AGENCY <i>AZ</i> <i>FIA</i>	NAME <i>S. NEZ</i>	INCIDENT ASSIGNMENT <i>STCR</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-5</i>		DATE/TIME CHECK IN <i>8/23</i> <i>2305</i>
HOME BASE <i>Whiteriver, AZ</i>		
DEPARTURE POINT <i>Whiteriver, AZ</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <i>4X4 3/4 TPU I-165847 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (Includes other qualifications) <i>TFLD</i> <i>Last Day Off 8/21</i>		
INCIDENT LOCATION <i>ICP</i>		TIME <i>8/23</i> <i>2330</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE <i>Drove with W. Thomas (O-4) in pickup I-165847</i>		

Front

AGENCY	NAME	INCIDENT ASSIGNMENT
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

# From Exercise #3, Item #15 (STCR Thomas)

AGENCY <i>AZ</i> <i>FIA</i>	NAME <i>W. THOMAS</i>	INCIDENT ASSIGNMENT <i>STCR</i>
ORDER/REQUEST NO. <i>CA-BD41-590</i> <i>O-4</i>		DATE/TIME CHECK IN <i>8/23</i> <i>2305</i>
HOME BASE <i>Whiteriver, AZ</i>		
DEPARTURE POINT <i>Whiteriver, AZ</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <i>4X4 3/4 T P91 I-165847 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	WEIGHT	
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED	DATE/TIME CONFIRMED	
DESTINATION POINT	ETA	
REMARKS (includes other qualifications) <i>TFLD</i> <i>Last Day Off 8/21</i>		
INCIDENT LOCATION <i>ICP</i>	TIME <i>8/23</i> <i>2330</i>	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE <i>Drove with S. Nez (O-5) in pick-up I-165847</i>		

Front

AGENCY	NAME	INCIDENT ASSIGNMENT
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

From Exercise #3, Item #16 (Mormon Lake IHC)

AGENCY <i>AZ</i> <i>COF</i>	ST TF	KIND <i>C</i>	TYPE <i>1</i>	ID. NO. <i>Mormon Lake</i> <i>IHC</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-2</i>		DATE/TIME CHECK IN <i>8-23</i> <i>2355</i>		
HOME BASE <i>Flagstaff, AZ</i>				
DEPARTURE POINT <i>Flagstaff, AZ</i>				
LEADER NAME <i>J. Tisino</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS) <i>Russell Copp - EMT 1</i>				
NO. PERSONNEL <i>20</i>		MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,706</i>
METHOD OF TRAVEL <input type="checkbox"/> OWN <input checked="" type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Need Transportation while on incident</i>				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Jesse Tisino DIVS Qualified</i> <i>Last Day Off 8/22</i>				
ICS 219-2 (Rev. 4/82) CREW NFES 1344				

Front

AGENCY <i>AZ</i> <i>COF</i>	ST TF	KIND <i>C</i>	TYPE <i>1</i>	ID. NO./NAME <i>Mormon Lake</i> <i>IHC</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/24</i> <i>0015</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

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## Exercise #5 Updating Resource Status and Resource Locator Solution

Read and review the Status/Check-in Recorder Job Aid pages 59 through 65 prior to beginning this exercise. This exercise will provide you the opportunity to update necessary information on ICS Form 219, Resource Status Cards (T-Cards) and the Resource Locator.

### Exercise #5 Part 1 Directions:

It is now August 24th, 0600 hours and all resources have been assigned on the incident as identified below. Record this status change information on each appropriate ICS Form 219, Resource Status Card that was completed in Exercise 4. Resources are identified by their Resource Order Request #; i.e., O-8, A-5, etc. Operations has requested a Task Force and a Strike Team to be created as indicated below.

### Incident Assignment

Division A ..... O-1, E-1, C-1, E-3

Division B ..... O-2, (CARP TF #1 consisting of O-4, C-5, E-2, E-8, E-11)

Division C ..... J. Tisino (C-2) DIVS, (CARP ST #2 consisting of O-5, C-3 & C-4),  
O-9, E-9, C-2

Group E ..... E-11, with Olson as Group Supervisor

### Air Operations

Fixed Wing Base ..... O-8, A-4, A-5, A-6

These resources are assigned to Ryan Field and this was noted on the Resource Status Cards. There is no change in status to update at this time.

Helibase ..... O-3, A-1, A-2, A-3

These resources were assigned to the helibase at check-in and this was noted on the Resource Status Cards. There is no change in status to update at this time.

# Updated Status For Division A (O-1)

AGENCY <i>CA</i> <i>BDU</i>	NAME <i>R. REGAN</i>	INCIDENT ASSIGNMENT <i>DIVS</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-1</i>	DATE/TIME CHECK IN <i>8/23</i> <i>1630</i>	
HOME BASE <i>San Bernardino</i>		
DEPARTURE POINT <i>San Bernardino</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR OTHER <i>4X2 1/2 TPTU 6511 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	WEIGHT	
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED	DATE/TIME CONFIRMED	
DESTINATION POINT	ETA	
REMARKS (Include other qualifications) <i>RESL</i> <i>Last Day Off 8/21</i>		
INCIDENT LOCATION <i>ICP</i>	TIME <i>8/23</i> <i>1700</i>	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Front

AGENCY <i>CA</i> <i>BDU</i>	NAME <i>R. REGAN</i>	INCIDENT ASSIGNMENT <i>DIVS</i>
INCIDENT LOCATION <i>Division A</i>	TIME <i>8/24</i> <i>0600</i>	
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION	TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION	TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

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# Updated Status For Division A (E-1)

AGENCY <i>CA</i> <i>BDF</i>	ST	TR	KIND <i>E</i>	TYPE <i>6X</i>	I.D. NO. <i>333</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-1</i>			DATE/TIME CHECK IN <i>8-23</i> <i>1801</i>		
HOME BASE <i>Lytle Creek Ranger District</i>					
DEPARTURE POINT <i>Lytle Creek Ranger District</i>					
LEADER NAME <i>D. Strong</i>					
RESOURCE I.D. NO./NAMES <i>Crewmembers - A. Green, B. Williams</i> <i>S. Strong - Relief Foreman</i> <i>Crewmembers - M. Link, S. Smith</i>					
DESTINATION POINT					ETA
REMARKS <i>Diesel Powered</i> <i>Last Day Off 8/18</i>					
INCIDENT LOCATION <i>ICP</i>					TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE <i>Extra Vehicle - Gas</i> <i>4X2 3/4T PU A-445909</i>					

Front

AGENCY <i>CA</i> <i>BDF</i>	ST	TR	KIND <i>E</i>	TYPE <i>6X</i>	I.D. NO./NAME <i>333</i>
INCIDENT LOCATION <i>Division A</i>					TIME <i>8-24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

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# Updated Status For Division A (C-1)

AGENCY <i>ID</i> <i>BOF</i>	ST <i>TR</i>	KIND <i>C</i>	TYPE <i>1</i>	ID. NO. <i>Boise IHC</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-1</i>		DATE/TIME CHECK IN <i>8-23</i> <i>1810</i>		
HOME BASE <i>Boise, Idaho</i>				
DEPARTURE POINT <i>BBD - Green Horn Fire (C-6)</i>				
LEADER NAME <i>J. Cook</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS)				
NO. PERSONNEL <i>20</i>		MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,817</i>
METHOD OF TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Carriers 9-623541 9-623633 (diesel)</i> <i>+ 4X2 1/2 TPU 9-956321 (gas)</i>				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Released from Green Horn Fire 8/23@ 0800</i> <i>Last Day Off 8/16</i>				

ICS 213-2 (Rev. 4/82) CREW NEES 1344

Front

AGENCY <i>ID</i> <i>BOF</i>	ST <i>TR</i>	KIND <i>C</i>	TYPE <i>1</i>	ID. NO./NAME <i>Boise IHC</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION <i>DIV A</i>				TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

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# Updated Status For Division A (E-3)

AGENCY <i>CA</i> <i>CDD</i>	ST	TF	KIND <i>D</i>	TYPE <i>2</i>	ID. NO. <i>BLM D6C</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-3</i>			DATE/TIME CHECK IN <i>8-23</i> <i>1830</i>		
HOME BASE <i>Riverside, CA</i>					
DEPARTURE POINT <i>Riverside, CA</i>					
LEADER NAME <i>M. Jones</i>					
RESOURCE ID. NO./NAMES <i>B. Flat - Swamper</i>					
<i>B. Quick - Transport Driver and Relief Operator</i>					
DESTINATION POINT					ETA
REMARKS <i>Has Lights and Adjustable Straight Blade Lowboy Transport I-186512 is Assigned</i>					
INCIDENT LOCATION <i>ICP</i>					TIME <i>8/23</i> <i>1900</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE <i>Last Day Off 8/21</i>					

ICS 219-7 (Rev. 4/98) DOZERS NEES 1349

Front

AGENCY <i>CA</i> <i>CDD</i>	ST	TF	KIND <i>D</i>	TYPE <i>2</i>	ID. NO./NAME <i>BLM D6C</i>
INCIDENT LOCATION <i>DIVS A</i>					TIME <i>8-24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

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# Updated Status For Division B (O-2)

AGENCY <b>CA</b> <b>BDF</b>	NAME <b>J. HORINE</b>	INCIDENT ASSIGNMENT <b>DIVS</b>
ORDER/REQUEST NO. <b>CA-BD11-590</b> <b>O-2</b>		DATE/TIME CHECK IN <b>8/23</b> <b>1720</b>
HOME BASE <b>LYTLE CREEK</b> <b>RANGER DISTRICT</b>		
DEPARTURE POINT <b>LYTLE CREEK</b> <b>RANGER DISTRICT</b>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <b>AX2 1/2 HP A-698762 Gas</b>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (includes other qualifications) <b>PSC2</b> <b>Last Day Off 8/21</b>		
INCIDENT LOCATION <b>ICP</b>		TIME <b>8/23</b> <b>1800</b>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

IC9-310-5 (Rev. 4-82) PERSONNEL

Front

AGENCY <b>CA</b> <b>BDF</b>	NAME <b>J. HORINE</b>	INCIDENT ASSIGNMENT <b>DIVS</b>
INCIDENT LOCATION <b>DIVS B</b>		TIME <b>8/24</b> <b>0600</b>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

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Updated Status For Division B (Carp TF #1)  
Resource Status Cards for O-4, C-5, E-2, E-8, and E-11 are filed behind

AGENCY <b>CARP</b>	ST TF <b>TF</b>	KIND 	TYPE 	I.D. NO. <b>1</b>
ORDER/REQUEST NO.		DATE/TIME CHECK IN		
HOME BASE				
DEPARTURE POINT				
LEADER NAME <i>W. Thomas - TFLD</i>				
RESOURCE I.D. NO./NAMES <i>L and L Construction Dozer</i>				
<i>Rezick Equipment Water Tender</i>				
<i>Engine 6578</i>				
<i>Wasatch Regulars #2</i>				
DESTINATION POINT				ETA
REMARKS				
INCIDENT LOCATION <i>Division B</i>				TIME <i>8/24 0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
IOS 219-B (Rev. 4/82) MISC. EQUIP/TASK FORCE				

Front

AGENCY	ST TF	KIND 	TYPE 	I.D. NO./NAME
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

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# Updated Status For Division B (O-4)

AGENCY <b>AZ</b> <b>FIA</b>	NAME <b>W. THOMAS</b>	INCIDENT ASSIGNMENT <b>STCR</b>
ORDER/REQUEST NO. <b>CA-BDU-590</b> <b>O-4</b>		DATE/TIME CHECK IN <b>8/23</b> <b>2305</b>
HOME BASE <b>Whiteriver, AZ</b>		
DEPARTURE POINT <b>Whiteriver, AZ</b>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <b>AXA 3141 PUL I-165847 Gas</b>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (includes other qualifications) <b>TFLD</b> <b>Last Day Off 8/21</b>		
INCIDENT LOCATION <b>ICP</b>		TIME <b>8/23</b> <b>2330</b>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE <b>Drove with S. Nez (O-5) in pick-up I-165847</b>		

Front

AGENCY <b>AZ</b> <b>FIA</b>	NAME <b>W. THOMAS</b>	INCIDENT ASSIGNMENT <b>STCR</b>
INCIDENT LOCATION <b>DIVS B</b>		TIME <b>8/24</b> <b>0600</b>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE <b>CARP TF #1</b>		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

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AGENCY <i>UT</i> <i>WCJ</i>	ST <i>T</i>	KIND <i>C</i>	TYPE <i>2</i>	I.D. NO. <i>Wasatch</i> <i>Reg #2</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-5</i>		DATE/TIME CHECK IN <i>8-23</i> <i>1815</i>		
HOME BASE <i>Salt Lake City, UT</i>				
DEPARTURE POINT <i>Salt Lake City, UT</i>				
LEADER NAME <i>M. Boren</i>				
CREW ID NO/NAME (FOR STRIKE TEAMS)				
NO. PERSONNEL <i>20</i>	MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,357</i>	
METHOD OF TRAVEL <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input checked="" type="checkbox"/> AIR				
OTHER				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Flew to Ontario - 6X2 Bus</i> <i>Lic #663A5587 Assigned.</i> <i>Last Day Off 8/22</i>				

Front

AGENCY <i>UT</i> <i>WCF</i>	ST TR	KIND <i>C</i>	TYPE <i>2</i>	I.D. NO./NAME <i>Wasatch</i> <i>Reg #2</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION <i>DIVS B</i>				TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>CARP TF #1</i>				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

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# Updated Status For Division B (E-2)

AGENCY <i>CA</i> <i>SKU</i>	ST TF	KIND <i>E</i>	TYPE <i>3</i>	I.D. NO. <i>6578</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-2</i>		DATE/TIME CHECK IN <i>8-23/1300</i>		
HOME BASE <i>Yreka, California</i>				
DEPARTURE POINT <i>Yreka, California</i>				
LEADER NAME <i>Jim Smith</i>				
RESOURCE I.D. NO./NAMES <i>Crewmembers</i>				
<i>C. Henry</i>				
<i>C. Johnson</i>				
DESTINATION POINT				ETA
REMARKS <i>Gasoline Powered</i> <i>Last Day Off 8/19</i>				
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

ICS 213-3 (Rev. 4/82) ENGINE

Front

AGENCY <i>CA</i> <i>SKU</i>	ST TF	KIND <i>E</i>	TYPE <i>3</i>	I.D. NO./NAME <i>6578</i>
INCIDENT LOCATION <i>DIVS B</i>				TIME <i>8-24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>CARP TJ#1</i>				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

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# Updated Status For Division B (E-8)

AGENCY	ST	TF	KIND	TYPE	ID. NO.
CA-PVT			D	1	L and L Construction
ORDER/REQUEST NO. CA-BDU-590 E-8		DATE/TIME CHECK IN 8-23 1930			
HOME BASE Lake Elsinore					
DEPARTURE POINT Lake Elsinore					
LEADER NAME J. Hancock					
RESOURCE ID. NO./NAMES D-8					
DESTINATION POINT					ETA
REMARKS Diesel Powered, Fixed Straight Blade, Has Lights, and Last Day Off 8/21					
INCIDENT LOCATION ICP					TIME 8/23 2000
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE No Swamper Assigned Transport Returned to Home Base					

Front

AGENCY	ST	TF	KIND	TYPE	ID. NO./NAME
CA-PVT			D	1	L and L Construction
INCIDENT LOCATION DIV'S B					TIME 8-24 0600
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE CARPTF #1					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

Back

# Updated Status For Division B (E-11)

AGENCY <i>CA</i> <i>PVI</i>	ST TF	KIND <i>WT</i>	TYPE <i>2</i>	I.D. NO. <i>Rezick</i> <i>Equipment</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-11</i>		DATE/TIME CHECK IN <i>8/23 1945</i>		
HOME BASE <i>San Bernardino</i>				
DEPARTURE POINT <i>Same</i>				
LEADER NAME <i>S. Craig</i>				
RESOURCE I.D. NO.S/NAMES				
DESTINATION POINT				ETA
REMARKS <i>3,000 gal. diesel with 350gpm pump</i> <i>Last Day Off 8/21</i>				
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>2000</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

ICS 212.6 (Rev. 4/82) MISC. EQUIP./TASK FORCE

Front

AGENCY <i>CA</i> <i>PVI</i>	ST TF	KIND <i>WT</i>	TYPE <i>2</i>	I.D. NO./NAME <i>Rezick</i> <i>Equipment</i>
INCIDENT LOCATION <i>DIVS B</i>				TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>CARP TF #1</i>				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back



# Updated Status For Division C (J. Tisino, DIVS, C-2)

AGENCY <i>AZ</i> <i>COF</i>	NAME <i>J. TISINO</i>	INCIDENT ASSIGNMENT <i>DIVS</i>
ORDER/REQUEST NO.		DATE/TIME CHECK IN
HOME BASE		
DEPARTURE POINT		
METHOD TRAVEL <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
ON MANIFEST <input type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (includes other qualifications)		
INCIDENT LOCATION  <i>DIVISION C</i>		TIME  <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE  <i>Crew Superintendant for Mormon Lake IHC (C-2)</i>		

ICS 219-5 (Rev. 4/82) PERSONNEL

Front

AGENCY	NAME	INCIDENT ASSIGNMENT
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

USGBO 1989-A93-332

Back

# Updated Status For Division C (C-2)

AGENCY <i>AZ</i> <i>COF</i>	ST TF	KIND <i>C</i>	TYPE <i>1</i>	ID NO. <i>Mormon Lake</i> <i>IHC</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-2</i>		DATE/TIME CHECK IN <i>8-23</i> <i>2355</i>		
HOME BASE <i>Flagstaff, AZ</i>				
DEPARTURE POINT <i>Flagstaff, AZ</i>				
LEADER NAME <i>J. Tisino</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS) <i>Russell Copp - FMT 1</i>				
NO. PERSONNEL <i>20</i>	MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,706</i>	
METHOD OF TRAVEL <input type="checkbox"/> OWN <input checked="" type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Need Transportation while on incident</i>				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Jesse Tisino DIVS Qualified</i> <i>Last Day Off 8/22</i>				

ICS 219-2 (Rev. 4/92) CREW NFES 1344

Front

AGENCY <i>AZ</i> <i>COF</i>	ST TF	KIND <i>C</i>	TYPE <i>1</i>	ID NO./NAME <i>Mormon Lake</i> <i>IHC</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/24</i> <i>0015</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION <i>DIVC</i>				TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>J. Tisino Assigned as DIVS For Div C</i> <i>Noted on White T Card</i>				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

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Updated Status For Division C (CART ST #2 Consisting of O-5, C-3, C-4)  
Resource Status Cards For O-5, C-3, and C-4 Are Filed Behind This Card

AGENCY	ST	TF	KIND	TYPE	I.D. NO.
CARP	ST		C	2	#2
ORDER/REQUEST NO.		DATE/TIME CHECK IN			
HOME BASE					
DEPARTURE POINT					
LEADER NAME S. Nez STCR					
CREW ID NO./NAME (FOR STRIKE TEAMS) San Carlos #57					
San Carlos #58					
NO. PERSONNEL		MANIFEST		WEIGHT	
		<input type="checkbox"/> YES <input type="checkbox"/> NO			
METHOD OF TRAVEL					
<input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR					
OTHER					
DESTINATION POINT				ETA	
TRANSPORTATION NEEDS					
<input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR					
OTHER					
ORDERED DATE/TIME			CONFIRMED DATE/TIME		
REMARKS					

ICS 219-2 (Rev. 4/92) CREW NFS 1344

Front

AGENCY	ST	TF	KIND	TYPE	I.D. NO./NAME
CARP	ST		C	2	#2
INCIDENT LOCATION Division C					TIME 8/24 0600
STATUS					
<input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS.					
<input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS					
<input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS.					
<input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS					
<input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS.					
<input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

Back

Updated Status For Division C (O-5)  
Filed Behind Strike Team Card

AGENCY <i>AZ</i> <i>FIA</i>	NAME <i>S. NEZ</i>	INCIDENT ASSIGNMENT <i>SICR</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-5</i>		DATE/TIME CHECK IN <i>8/23</i> <i>2305</i>
HOME BASE <i>Whiteriver, AZ</i>		
DEPARTURE POINT <i>Whiteriver, AZ</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <i>4X4 3/4T PU I-165847 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WEIGHT
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED		DATE/TIME CONFIRMED
DESTINATION POINT		ETA
REMARKS (includes other qualifications) <i>TFLD</i> <i>Last Day Off 8/21</i>		
INCIDENT LOCATION <i>ICP</i>		TIME <i>8/23</i> <i>2330</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE <i>Drove with W. Thomas (O-4) in pick-up I-165847</i>		

ICS 219-5 (Rev. 4/82) PERSONNEL

Front

AGENCY <i>AZ</i> <i>FIA</i>	NAME <i>S. NEZ</i>	INCIDENT ASSIGNMENT <i>SICR</i>
INCIDENT LOCATION <i>Division C</i>		TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE <i>CARP ST #2</i>		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

Updated Status For Division C (C-3)  
Filed Behind Strike Team Card

AGENCY <i>AZ</i> <i>SCA</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	ID. NO. <i>San Carlos</i> <i>#57</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-3</i>		DATE/TIME CHECK IN <i>8-23</i> <i>2115</i>		
HOME BASE <i>San Carlos</i>				
DEPARTURE POINT <i>San Carlos</i>				
LEADER NAME <i>R. Clayton</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS) <i>CRFP - M. Thorn - AZ-CNT</i>				
<i>Home Base Safford, AZ</i>				
<i>Last Day Off 8/21</i>				
NO. PERSONNEL <i>20</i>	MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,135</i>	
METHOD OF TRAVEL <input type="checkbox"/> OWN <input checked="" type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Motor Coach Returned Home</i>				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Crew's Last Day Off 8/22</i>				
ICS 219-2 (Rev. 4/02) CREW NFES 1344				

Front

AGENCY <i>AZ</i> <i>SCA</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	ID. NO./NAME <i>San Carlos</i> <i>#57</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>2130</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION <i>Division C</i>				TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>CARP ST #2</i>				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

Updated Status For Division C (C-4)  
Filed Behind Strike Team Card

AGENCY <i>AZ</i> <i>SCA</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	I.D. NO. <i>San Carlos</i> <i>#58</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-4</i>		DATE/TIME CHECK IN <i>8-23</i> <i>2115</i>		
HOME BASE <i>San Carlos</i>				
DEPARTURE POINT <i>San Carlos</i>				
LEADER NAME <i>B. Pafe</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS) <i>CRFP - C. Smith - AZ-CNF</i>				
<i>Home Base Safford, AZ</i>				
<i>Last Day Off 8/21</i>				
NO. PERSONNEL <i>20</i>		MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,367</i>
METHOD OF TRAVEL <input type="checkbox"/> OWN <input checked="" type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Motor Coach Returned Home</i>				
DESTINATION POINT				ETA
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Crew's Last Day Off 8/22</i>				

ICS 219-2 (Rev. 4/92) CREW NFES 1344

Front

AGENCY <i>AZ</i> <i>SCA</i>	ST TF	KIND <i>C</i>	TYPE <i>2</i>	I.D. NO./NAME <i>San Carlos</i> <i>#58</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>2130</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION <i>Divs C</i>				TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>CART ST #2</i>				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back

# Updated Status For Division C (O-9)

AGENCY <i>CA</i> <i>BDF</i>	NAME <i>M. STANTON</i>	INCIDENT ASSIGNMENT <i>DRIV</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>O-9</i>	DATE/TIME CHECK IN <i>8/23</i> <i>2100</i>	
HOME BASE <i>San Bernardino</i>		
DEPARTURE POINT <i>San Bernardino</i>		
METHOD TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER <i>4X4 3/4 TPU A-697548 Gas</i>		
ON MANIFEST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	WEIGHT	
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR		
OTHER		
DATE/TIME ORDERED	DATE/TIME CONFIRMED	
DESTINATION POINT	ETA	
REMARKS (includes other qualifications)		
INCIDENT LOCATION <i>Ground Support</i>	TIME <i>8/23</i> <i>2130</i>	
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE <i>Last Day Off 8/21</i> <i>PU Has Request #E-9</i>		

Front

AGENCY <i>CA</i> <i>BDF</i>	NAME <i>M. STANTON</i>	INCIDENT ASSIGNMENT <i>DRIV</i>
INCIDENT LOCATION <i>Division C</i>		TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		
INCIDENT LOCATION		TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR		
NOTE		

Back

# Updated Status For Division C (E-9)

AGENCY <i>CA</i> <i>BDJ</i>	ST TF	KIND <i>PU</i>	TYPE	I.D. NO. <i>A-697548</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-9</i>		DATE/TIME CHECK IN <i>8/23 2100</i>		
HOME BASE <i>San Bernardino</i>				
DEPARTURE POINT <i>Same</i>				
LEADER NAME <i>M. Stanton (O-9)</i>				
RESOURCE I.D. NO.S/NAMES				
DESTINATION POINT				ETA
REMARKS <i>4X4 3/4T Gas Pickup</i>				
INCIDENT LOCATION <i>Ground Support</i>				TIME <i>8/23 2130</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
ICS 219-B (Rev. 4/02) MISC. EQUIP./TASK FORCE				

Front

AGENCY <i>CA</i> <i>BDJ</i>	ST TF	KIND <i>PU</i>	TYPE	I.D. NO./NAME <i>A-697548</i>
INCIDENT LOCATION <i>Divs C</i>				TIME <i>8/24 0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Back



**Exercise #5**  
**Updating Resource Status and Resource Locator**  
**Solution**

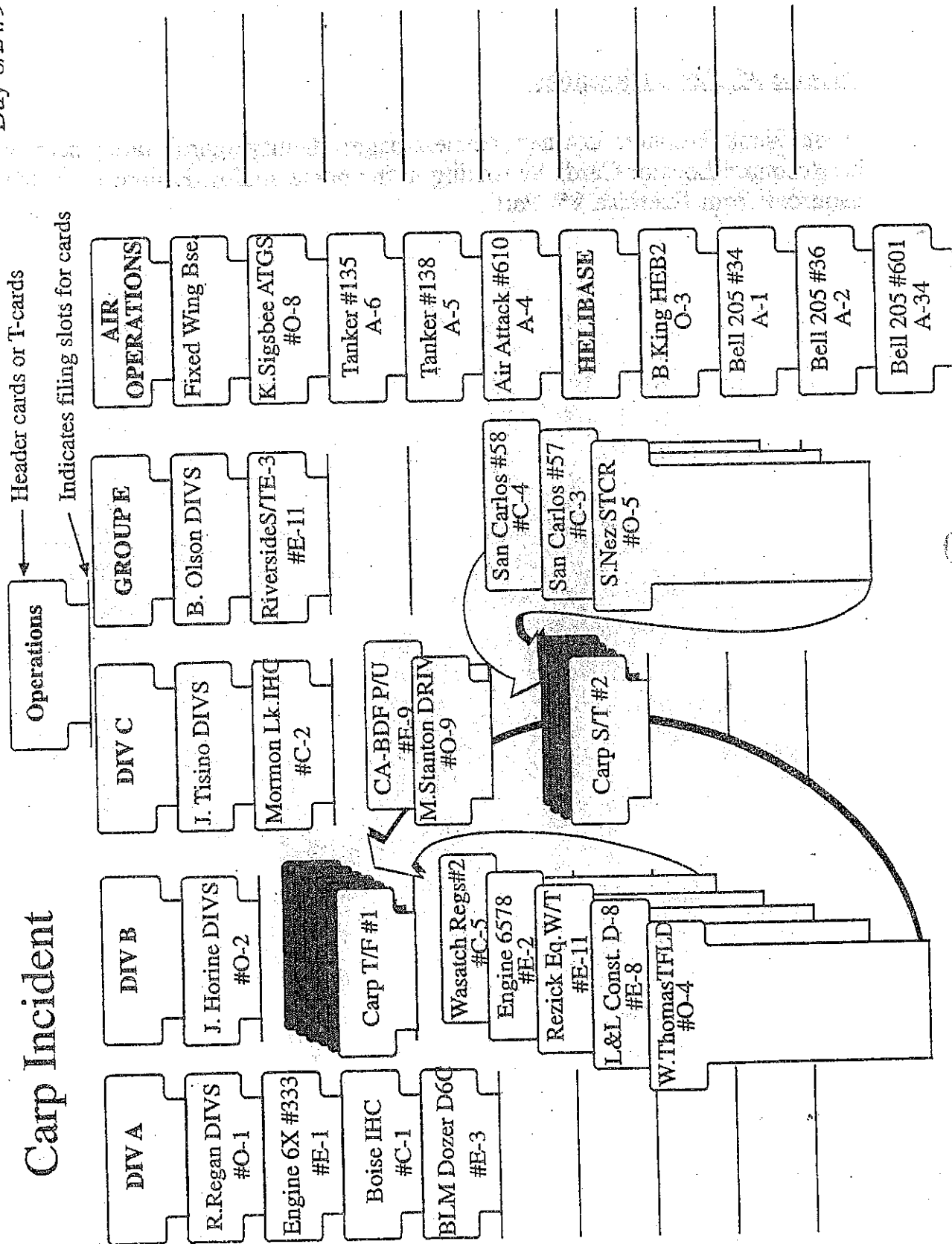
Exercise #5 Part 2 Directions:

On the blank Resource Locator (see next page) identify appropriate placement of the Resource Locator Cards by writing in the name and/or ID number of the resources from Exercise #5, Part 1.

# Exercise 5, Part 2 Solution

Day 8/24/96

## Carp Incident



**Exercise #6**  
**ICS Form 210, Status Change Card**

Read and review pages 67 to 69 of the Status/Check-in Recorder Job Aid prior to beginning this exercise. This exercise will provide you the opportunity to update necessary information on ICS Form 219, Resource Status Card (T-Card) from ICS Form 210, Status Change Card.

**Exercise #6 Part 1 Directions**

Review the following ICS Form 210, Status Change Cards that you received from the Communications Unit. Update the status on the ICS Form 219, Resource Status Cards from Exercise 4 as indicated on the Status Change Cards.

# Resource Status Card For CDF E-3 #6578

AGENCY <i>CA</i> <i>SKU</i>	ST TF	KIND <i>E</i>	TYPE <i>3</i>	I.D. NO. <i>6578</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-2</i>		DATE/TIME CHECK IN <i>8-23/1300</i>		
HOME BASE <i>Yreka, California</i>				
DEPARTURE POINT <i>Yreka, California</i>				
LEADER NAME <i>Jim Smith</i>				
RESOURCE I.D. NO./NAMES <i>Crewmembers</i>				
<i>L. Henry</i>				
<i>C. Johnson</i>				
DESTINATION POINT				ETA
REMARKS <i>Gasoline Powered</i> <i>Last Day Off 8/19</i>				
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

Front

AGENCY <i>CA</i> <i>SKU</i>	ST TF	KIND <i>E</i>	TYPE <i>3</i>	I.D. NO./NAME <i>6578</i>
INCIDENT LOCATION <i>DIVS B</i>				TIME <i>8-24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>CARP T#1</i>				
INCIDENT LOCATION <i>Incident Base</i>				TIME <i>8-24</i> <i>1614</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input checked="" type="checkbox"/> O/S MECH <input checked="" type="checkbox"/> ETR				
NOTE <i>Broken Rear Axle</i>				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

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# Resource Status Card For Bell 205 #34

AGENCY <i>CA-BDJ</i>	TYPE <i>2</i>	MANUFACTURER <i>BELL 205</i>	I.D. NO. <i>#34</i>
ORDER/REQUEST <i>CA-BDU-590 A-1</i>		DATE/TIME CHECK IN <i>8/23 2000</i>	
HOME BASE <i>Heap's Peak</i>			
DEPARTURE POINT <i>Heap's Peak</i>			
PILOT NAME <i>J. Finnerty</i>			
DESTINATION POINT		ETA	
REMARKS			
INCIDENT LOCATION <i>Helibase</i>		TIME <i>8/23 1400</i>	
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE <i>Last Day Off 8/18</i>			
INCIDENT LOCATION <i>Helibase</i>		TIME <i>8/24 1900</i>	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input checked="" type="checkbox"/> O/S MECH <input checked="" type="checkbox"/> ETR <i>0600</i>			
NOTE <i>100 Hour Maintenance Check</i>			

ICS 219-4 (4/82) HELICOPTER

Front

AGENCY	TYPE	MANUFACTURER	I.D. NO.
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			
INCIDENT LOCATION		TIME	
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR			
NOTE			

\*U.S. GPO: 1989-594-771

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# Resource Status Card For BLM D-2, D6C

AGENCY <i>CA</i> <i>CDD</i>	ST	TF	KIND <i>D</i>	TYPE <i>2</i>	I.D. NO. <i>BLM D6C</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>E-3</i>			DATE/TIME CHECK IN <i>8-23</i> <i>1830</i>		
HOME BASE <i>Riverside, CA</i>					
DEPARTURE POINT <i>Riverside, CA</i>					
LEADER NAME <i>M. Jones</i>					
RESOURCE ID. NO./NAMES <i>B. Flat - Swamper</i>					
<i>B. Quick - Transport Driver and Relief Operator</i>					
DESTINATION POINT					ETA
REMARKS <i>Has Lights and Adjustable Straight Blade Lowboy Transport I-186512 is Assigned</i>					
INCIDENT LOCATION <i>ICP</i>					TIME <i>8/23</i> <i>1900</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE <i>Last Day Off 8/21</i>					

ICS 219-7 (Rev. 4/82) DOZERS NFES 1349

Front

AGENCY <i>CA</i> <i>CDD</i>	ST	TF	KIND <i>D</i>	TYPE <i>2</i>	I.D. NO./NAME <i>BLM D6C</i>
INCIDENT LOCATION <i>DIV'S A</i>					TIME <i>8-24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION <i>Base</i>					TIME <i>8-25</i> <i>1200</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE <i>Division A Assignment Complete Can be Reassigned</i>					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					
INCIDENT LOCATION					TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR					
NOTE					

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AGENCY <i>ID</i>	ST TF	KIND <i>C</i>	TYPE <i>1</i>	I.D. NO. <i>Boise IAC</i>
ORDER/REQUEST NO. <i>CA-BDU-590</i> <i>C-1</i>		DATE/TIME CHECK IN <i>8-23</i> <i>1810</i>		
HOME BASE <i>Boise, Idaho</i>				
DEPARTURE POINT <i>BBD - Green Horn Fire (C-6)</i>				
LEADER NAME <i>J. Cook</i>				
CREW ID NO./NAME (FOR STRIKE TEAMS)				
NO. PERSONNEL <i>20</i>	MANIFEST <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		WEIGHT <i>4,817</i>	
METHOD OF TRAVEL <input checked="" type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER <i>Carriers A-623541, A-623633(diesel) + 4X2 1/2T PU A-956321(gas)</i>				
DESTINATION POINT			ETA	
TRANSPORTATION NEEDS <input type="checkbox"/> OWN <input type="checkbox"/> BUS <input type="checkbox"/> AIR				
OTHER				
ORDERED DATE/TIME		CONFIRMED DATE/TIME		
REMARKS <i>Released from Green Horn Fire 8/23@ 0800</i> <i>Last Day Off 8/16</i>				

AGENCY <i>ID</i> <i>BOF</i>	ST TR	KIND <i>C</i>	TYPE <i>1</i>	I.D. NO/NAME <i>Boise IAC</i>
INCIDENT LOCATION <i>ICP</i>				TIME <i>8/23</i> <i>1830</i>
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input checked="" type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION <i>DIV A</i>				TIME <i>8/24</i> <i>0600</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				
INCIDENT LOCATION <i>DIV B</i>				TIME <i>8/25</i> <i>1300</i>
STATUS <input checked="" type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE <i>Division A Assignment Complete</i> <i>Moved For Additional Support to Division B</i>				
INCIDENT LOCATION				TIME
STATUS <input type="checkbox"/> ASSIGNED <input type="checkbox"/> O/S REST <input type="checkbox"/> O/S PERS. <input type="checkbox"/> AVAILABLE <input type="checkbox"/> O/S MECH <input type="checkbox"/> ETR				
NOTE				

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