

Incident Action Plan

FS001-23

Operational Period:

2023-07-02

2023-07-02

to

8:00

20:00



Incident Commander: _____ Scott Atigikyoak

Planning Section Chief: _____ Raelene Lamalice



Incident Objectives (ICS 202-WF)

1. INCIDENT NAME	FS001-23	2. DATE PREPARED	7/1/2023	3. FIRE SIZE	450,803.0 ha
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4. OPERATIONAL PERIOD	Date From:	7/2/2023	Date To:	7/2/2023
	Time From:	8:00	Time To:	20:00

5. GENERAL CONTROL OBJECTIVES FOR THE INCIDENT (include alternatives)

1. Prevent fire from approaching community from NE.
2. Maintain state of readiness from ignition operation under proper conditions through July 7, 2023.
3. Prevent fire approachment towards community along south and east perimeters through July 7, 2023.
4. Maintain and assess values protection requirements on surrounding VARs in affecting area through July 07, 2023.

6. WEATHER FORECAST (Y/N)

Max Temp: 21C MIN RH: 21% Wind: NLY 10G25
Mainly cloudy. PM Thundershowers.

7. GENERAL SAFETY MESSAGE

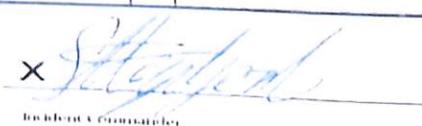
Safety attitude - Hold tailgate meeting prior to starting any task.
Hydration - Drink lots of fluids, if doing strenuous work
Injury prevention - Always wear hearing & eye protection when operating equipment.
Communication - If you don't know how to do a job safely, stop and ask.

We are bound by the GNWT code of conduct so please refrain from postings pictures and videos of operations on social media.

Utilize the drying tent for dry clothes and boots.

8. ATTACHMENTS (check if attached)

<input checked="" type="checkbox"/>	Organization List (ICS 203)	<input checked="" type="checkbox"/>	Assignment List (ICS 204)	<input checked="" type="checkbox"/>	Communications Plan (ICS 205)	<input type="checkbox"/>	Traffic Plan
<input checked="" type="checkbox"/>	Incident Map	<input checked="" type="checkbox"/>	Medical Plan	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	

9. PREPARED BY: (Planning Section Chief)	Raelene Lamallice	Incident Commander Signature: (Digital or Print and Sign)	 Incident Commander
10. APPROVED BY: (Incident Commander)	Scott Atigikyoak		



Assignment List (ICS 204-WF)

1. BRANCH	2. DIVISION/GROUP/STAGING		Div. Bravo		
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3. INCIDENT NAME FS001-23	4. OPERATIONAL PERIOD	Date From:	2023-07-02	Date To:	2023-07-02
		Time From:	8:00	Time To:	20:00

5. OPERATIONAL PERSONNEL			
Operations Section Chief	Scott Atigikyoak	Division/Group Supervisor	Alfred (AJ) Lawrence
Branch Director		Operations Section Chief	

6. RESOURCES ASSIGNED TO THIS PERIOD				
Resource Identifier	Leader	No. of Persons	Contact	Type or Select a Heading
NS2	Trenton Coe	4	Channel 1	Sambaa K'e Base
NS3	Eric Apples	4	Channel 1	Sambaa K'e Base

7. TACTICAL ASSIGNMENTS

NS2: cold trail along the river past the winter road crossing, look for hotspots 200 ft. in. After south of runway hotspots extinguished.

NS3: continue to blackline in section R22 and push back throught R23.

8. SPECIAL INSTRUCTIONS

-Stay hydrated.

-Watch for overhead hazards

-Watch for increase fire behaviour.

9. COMMUNICATIONS SUMMARY							
Name	Channel	Function	Rx Frequency	Rx Tone	Tx Frequency	Tx Tone	Remarks
Crew Ground to Ground	1	Simplex	153.11		153.11		
Ground to Air	4	Simplex	153.62		153.62		
Regional Office	14	Repeater	161.535		161.535		

10. PREPARED BY	Position:	Planning Section Chief	Name:	Raelene Lamalice
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Medical Plan (ICS 206-WF)

1. INCIDENT NAME FS001-23	2. OPERATIONAL PERIOD	Date From:	2023-07-02	Date To:	2023-07-02
		Time From:	8:00	Time To:	20:00

3. INCIDENT MEDICAL AID STATION				
Medical Aid Stations	Location	Contact (number or frequency)	Paramedics	
			Yes	No
Sambaa K'e Fire Base	Sambaa K'e	Channel 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Charles Tetcho School	Sambaa K'e	Channel 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

4. TRANSPORTATION (indicate air or ground)				
Medivac Services	Location	Contact (number or frequency)	Level of Service	
			ALS	BLS
PNZ	Bucketing, staging	Ch 4	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

5. HOSPITALS								
Hospital Name	Address (Lat. and Long if Helipad)	Travel Time		Contact (number or frequency)	Helipad		Burn Ctr.	
		Air	Grnd		Y	N	Y	N
Fort Liard Health Centre	Valley Main St	40 min	N/A	867-777--4301	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fort Nelson Hospital	5315 Liard Street	65 min	N/A	250-774-8100	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. MEDICAL EMERGENCY PROCEDURES

Contact OSC on channel 1 to relay incident has occurred and what is required.
 OSC will respond as necessary.
 Complete a reporting incident/hazard form and forward to the PSC.
 Polo Ganzales is the designated medic onsite.

7. PREPARED BY	Position:	Logistics Section Chief	Name:	Joshua Coyen
8. APPROVED BY	Position:	Incident Commander	Name:	Scott Atigikyoak



Air Operations Summary (ICS 220-WF)

1. INCIDENT NAME		2. OPERATIONAL PERIOD		Date From:	2023-07-02	Date To:	2023-07-02
FS001-23				Time From	8:00	Time To:	
3. REMARKS (safety notes, hazards, etc.)				4. MEDIVAC AIRCRAFT			
Remember helicopter and air tanker safety. Take your time. Approach with caution and when approved by pilot. Avoid getting caught in a drop zone.				PNZ			
Sunrise	4:41:00 AM	Sunset	23:36				

5. NOTAM Map Attached (NOTAM box will be hidden)

Radius nm		Latitude	
Altitude ASL		Longitude	
Center Point			

6. PERSONNEL			7. FREQUENCIES		
Position	Name	Phone #	Frequency	Rx	Tx

8. AIRCRAFT						
Reg.	Make/Model	Base	Start	Remarks	Pilot	Contact #
PNZ	ASTAR	YVQ	900	Bucket ship/Crew moves	Jonathan Isinring	867-336-2721

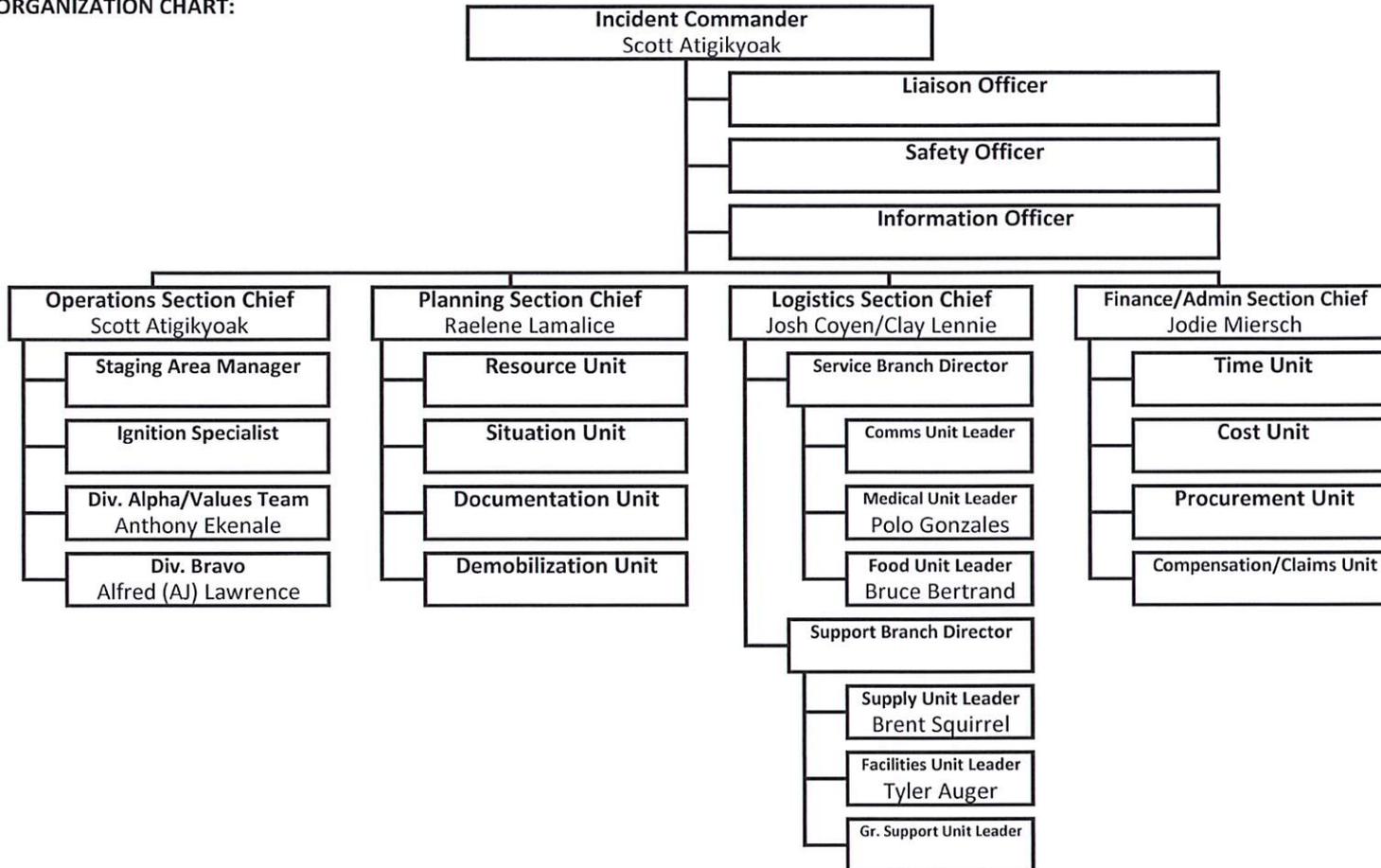
9. Page	1	of	1	10. PREPARED BY	Position:	Incident Commander	Name:	Scott Atigikyoak
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Incident Organization Chart (ICS 207-WF)

1. INCIDENT NAME FS001-23		2. OPERATIONAL PERIOD		Date From: 2023-07-02	Date To: 2023-07-02
				Time From: 8:00	Time To: 20:00
3. PREPARED BY	Position:	Planning Section Chief	Name:	Raelene Lamalice	

4. ORGANIZATION CHART:



FS001-23 Contact List

Position	Name	Phone Number
IC	Scott Atigikyoak	867-872-0662
PSC	Raelene Lamalice	780-380-7348
LSC	Joshua Coyen	867-872-8180
LSC Deputy	Clay Lennie	867-374-0533
FSC	Jodie Miersch	867-872-0719
DIVS	Anthony Ekenale	867-688-0134
DIVS	Alfred (AJ) Lawrence	87-447-1024
DC4	Joe Badger	867-695-1686
DC6	Darren Klondike	867-695-1689
NS2	Trenton Coe	867-688-9245
NS3	Eric Apples	867-785-0768
SS1	Dillain Cardinal	867-621-7317
Medic	Polo Gonzales	867-446-2955
Sambaa K'e	Ruby Jumbo	867-446-9785

FS001-23

Date: 2023-06-26



-  Communities
-  VARs
-  Catguard (NOT GPS'd)
-  1 km Grid
-  Winter Road
-  Cutline
-  Trail
-  Fire Perimeter



1:40,000



Note: This is not a legal document
Map Author: Jenny Tjhin
Author Email: Jenny_Tjhin@gov.nt.ca
Additional Map Inquiries:
Matthew_Coyte@gov.nt.ca

Map Grid: 1 km

Sambaa K'e

Div B

Div A

27
26
25
24
23
22
21
20
19
18
17

I J K L M N O P Q R S T U

Source: Esri, Maxar, Earthstar Geographics, and the GIS User Community