

# Incident Action Plan

FS001-23

Operational Period:

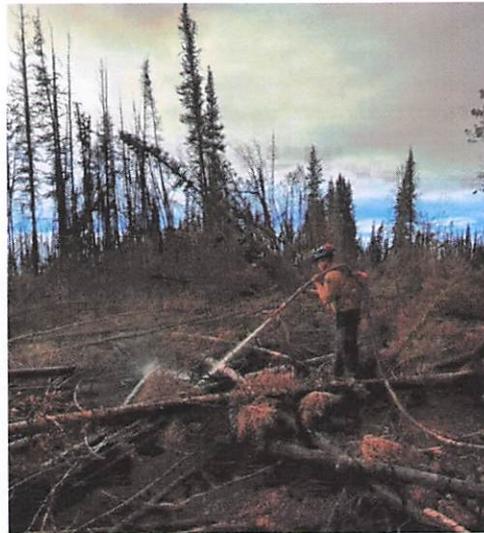
2023-07-04

2023-07-04

to

8:00

20:30



Incident Commander: \_\_\_\_\_ Scott Atigikyoak

Planning Section Chief: \_\_\_\_\_ Raelene Lamalice



# Incident Objectives (ICS 202-WF)

1. INCIDENT NAME	FS001-23	2. DATE PREPARED	7/3/2023	3. FIRE SIZE	541,490.0 ha
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4. OPERATIONAL PERIOD	Date From:	7/4/2023	Date To:	7/4/2023
	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: 30C MIN RH: 20% Wind: SW 10G25  
Hot and very dry. Sunny.

7. GENERAL SAFETY MESSAGE

Hydration - Drink lots of fluids if doing strenuous work.  
 Hat exhaustion - Rest periods in cooler area with water breaks.  
 Avoid injury - Use buddy system for heavy lifting.  
 Safety Attitude - Monitor individual physical condition and that your co-workers. Wildlife - Report all wildlife encounters to supervisors and crew members.

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

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 Lamalice	Incident Commander Signature: (Digital or Print and Sign)	 Incident Commander
10. APPROVED BY: (Incident Commander)	Scott Atigikyok		



# Organization Assignment List (ICS 203-WF)

1. INCIDENT NAME	FS001-23	3. OPERATIONAL PERIOD	Date From:	2023-07-03	Date To:	2023-07-03
2. DATE PREPARED	2023-07-02		Time From:	8:00	Time To:	20:30

4. INCIDENT AND COMMAND STAFF	
Incident Commander/ Unified Commanders	Scott Atigikyoak
Deputy	
Safety Officer	
Information Officer	
Liaison Officer	

5. AGENCY/ORGANIZATION REPRESENTATIVES	
Agency/Organization	Representative

6. PLANNING SECTION	
Chief	Raelene Lamalice
Deputy	
Resources Unit	
Situation Unit	
Documentation Unit	
Technical Specialists	
Fire Behaviour Analyst	
G.I.S. Specialist	

7. LOGISTICS SECTION	
Chief	Josh Coyen
Deputy	Clay Lennie
a. SUPPORT BRANCH	
Director	
Supply Unit	Brent Squirrel
Facilities Unit	Tyler Auger
Ground Support Unit	
b. SERVICE BRANCH	
Director	
Communications Unit	
Medical Unit	Polo Gonzales
Food Unit	

8. OPERATIONS SECTION	
Chief	Scott Atigikyoak
Deputy	
a. BRANCH	
Branch Director	
Deputy	
Division/Group	Div A Sup Anthony Ekenale
Division/Group	Div B Sup Anthony Ekenale
Division/Group	Values Protection Team
Division/Group	
Division/Group	
b. BRANCH	
Branch Director	
Deputy	
Division/Group	
c. BRANCH	
Branch Director	
Deputy	
Division/Group	
d. AIR OPERATIONS BRANCH	
Air Operations Br. Dir.	
Air Tactical Group Sup.	
Air Support Group Sup.	

10. PREPARED BY	Position:	Planning Section Chief	Name:	Raelene Lamalice
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9. FINANCIAL/ADMINISTRATION SECTION	
Chief	
Deputy	
Time Unit	
Procurement Unit	
Compensation/Claims Unit	
Cost Unit	



# Assignment List (ICS 204-WF)

1. BRANCH		2. DIVISION/GROUP/STAGING	Div. Alpha & Bravo		
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3. INCIDENT NAME FS001-23	4. OPERATIONAL PERIOD	Date From:	2023-07-04	Date To:	2023-07-04
		Time From:	8:00	Time To:	20:30

### 5. OPERATIONAL PERSONNEL

Operations Section Chief	Scott Atigikyoak	Division/Group Supervisor	Anthony Ekenale
Branch Director		Division/Group Supervisor	

### 6. RESOURCES ASSIGNED TO THIS PERIOD

Resource Identifier	Leader	No. of Persons	Contact	Reporting Location
SS1	Dillan Cardinal	4	Channel 1	Sambaa K'e Base
DC4	Joe Badger	2	Channel 1	Sambaa K'e Base

### 7. TACTICAL ASSIGNMENTS

SS1: Demob gear in S21, R21, R22  
 DC4: Check on cabins at Island Lake and cabin on south side of Sambaa K'e. When completed, demob unused equipment around the community.

### 8. SPECIAL INSTRUCTIONS

-Make sure quads are filled up at the end of day, so they are ready to go next morning.  
 -Stay hydrated.  
 -Watch for hazards overhead.

### 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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# Incident Radio Communications Plan (ICS 205-WF)

<b>1. INCIDENT NAME</b>		<b>2. OPERATIONAL PERIOD</b>	<b>Date From:</b>	2023-07-04	<b>Date To:</b>	2023-07-04
FS001-23			<b>Time From:</b>	8:00	<b>Time To:</b>	20:30
<b>3. BASIC RADIO CHANNEL UTILIZATION</b>						
System/Type	Channel	Function	(Rx/Tx) Frequency	Tone	Assignment	Remarks
FM	1	Simplex	Rx153.110/Tx153.110		Ground to Ground	
FM	4	Simplex	Rx153.620/Tx153.620		Ground to Air	
FM	14	Repeater	Rx161.535/Tx161.535		Regional Office Comms	
<b>4. PREPARED BY</b>	<b>Position:</b>	Logistics Section Chief		<b>Name:</b>	Josh Coyen	



# Medical Plan (ICS 206-WF)

1. INCIDENT NAME FS001-23	2. OPERATIONAL PERIOD	Date From:	2023-07-04	Date To:	2023-07-04
		Time From:	8:00	Time To:	20:30

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:	Josh Coyen
8. APPROVED BY	Position:	Incident Commander	Name:	Scott Atigikyoak



# Air Operations Summary (ICS 220-WF)

<b>1. INCIDENT NAME</b> FS001-23		<b>2. OPERATIONAL PERIOD</b>		<b>Date From:</b> 2023-07-04	<b>Date To:</b> 2023-07-04
				<b>Time From:</b> 8:00	<b>Time To:</b> 20:30
<b>3. REMARKS (safety notes, hazards, etc.)</b>				<b>4. MEDIVAC AIRCRAFT</b>	
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	
<b>Sunrise</b>	<b>4:44:00 AM</b>	<b>Sunset</b>	<b>23:33</b>		

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

<b>Radius nm</b>		<b>Latitude</b>	
<b>Altitude ASL</b>		<b>Longitude</b>	
<b>Center Point</b>			

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	Thomas Rinner	250-793-8794

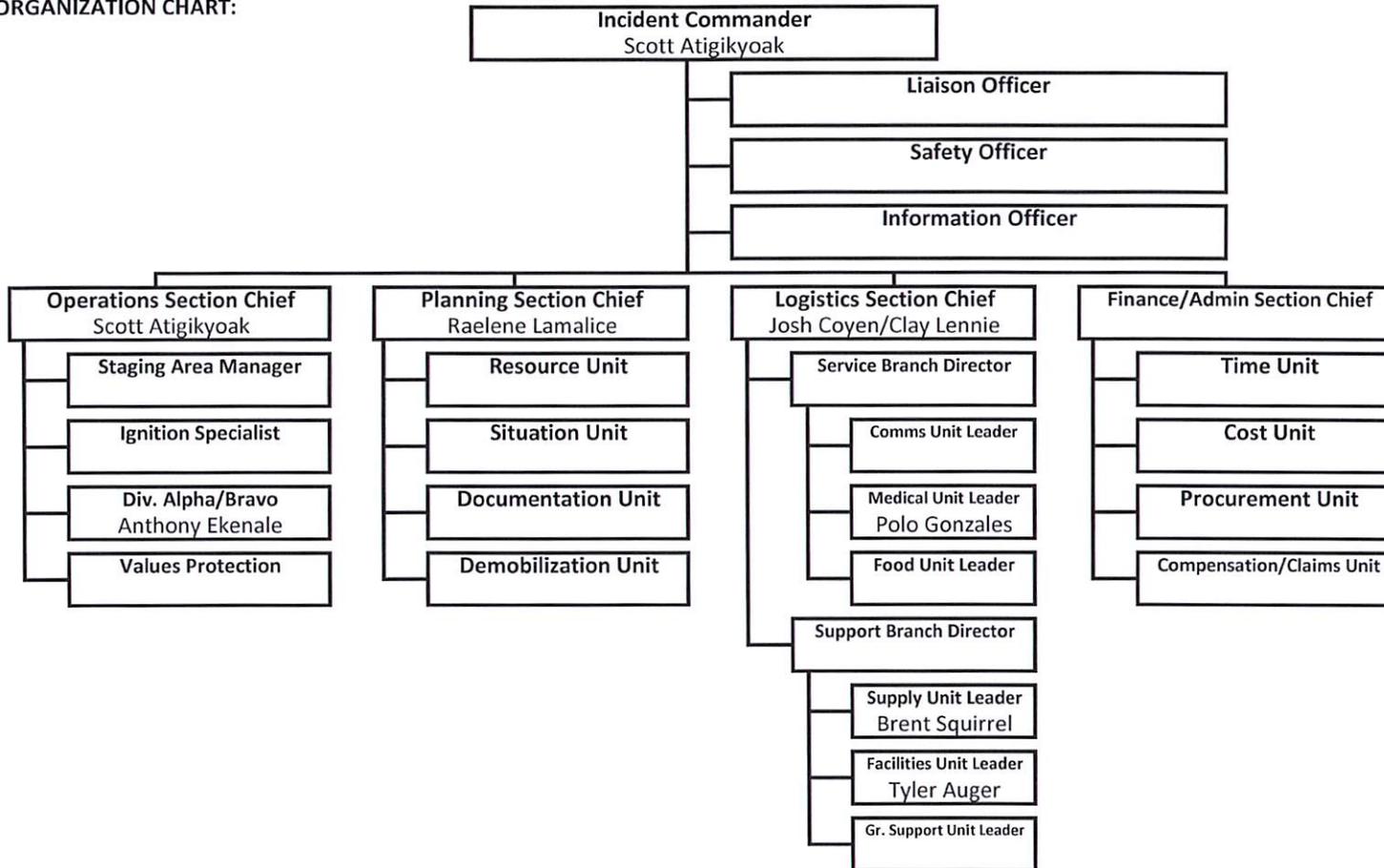
<b>9. Page</b> 1 of 1	<b>10. PREPARED BY</b>	<b>Position:</b> Incident Commander	<b>Name:</b> Scott Atigikyoak
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# Incident Organization Chart (ICS 207-WF)

<b>1. INCIDENT NAME</b> FS001-23		<b>2. OPERATIONAL PERIOD</b>		<b>Date From:</b> 2023-07-04	<b>Date To:</b> 2023-07-04
				<b>Time From:</b> 8:00	<b>Time To:</b> 20:30
<b>3. PREPARED BY</b>	<b>Position:</b>	Planning Section Chief	<b>Name:</b>	Raelene Lamalice	

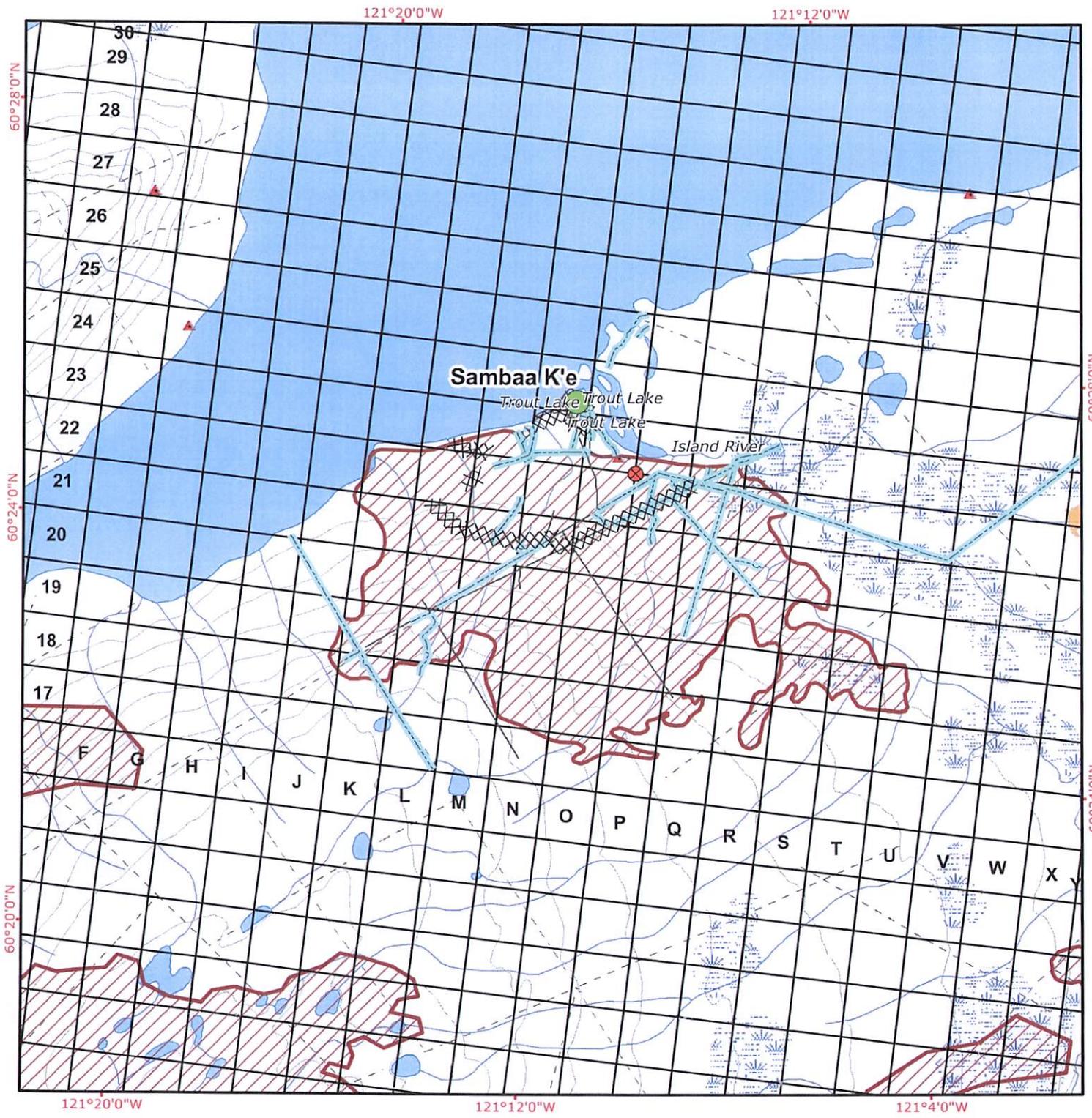
## 4. ORGANIZATION CHART:



## FS001-23 Contact List

Position	Name	Phone Number
IC	Scott Atigikyok	867-872-0662
PSC	Raelene Lamalice	780-380-7348
LSC	Joshua Coyen	867-872-8180
LSC Deputy	Clay Lennie	867-374-0533
DIVS	Anthony Ekenale	867-688-0134
DC4	Joe Badger	867-695-1686
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: 2023-07-02  
Time: 4:45:27 PM

Ignition Area: 3794.6 Ha  
Total Fire Size: 541,490 Ha

- Fuel Cache
  - Current Fire Sit
  - Community
  - Catguards
  - VAR Point General
  - Tree Line
  - Paved
  - Unpaved
  - Winter
  - GPS Perimeter
  - Other Fires
  - Rocks & Hazards
  - Trails
  - Cutlines
  - Railway
  - Contours (x50m)
  - Rivers & Streams
  - Sand
  - Wetlands
  - Lakes
- |  |                  |
|--|------------------|
|  | 1980 and earlier |
|  | 1981-1985        |
|  | 1986-1990        |
|  | 1991-1995        |
|  | 1996-2000        |
|  | 2001-2005        |
|  | 2006-2010        |
|  | 2011-2015        |
|  | 2016-2022        |



1:100,000

Projection:  
Albers Equal Area  
(-96, 20, 60, 40)



Note: This is not a legal document

Map Author: Your name here  
Author Email: your\_email@gov.nt.ca  
Additional Map Inquiries:  
matthew\_coyle@gov.nt.ca



1 Km Grid