

# Shelby County EMA / Conservation Burn Plan

## Owner & Property Information

Owner

Home Phone

Cell Phone

Property Name

Property Address

City / State / Zip

Township / Section / Range

Lat / Long

Shelby County Burn Unit Name

County PSAP

Acres to be burned

Shelby County EMA/911 (712) 755-5160

Crawford County Communications (712) 263-3195

Harrison County Communications (712) 644-2244

Pottawattamie County Communications (712) 890-2200

Audubon County Communications (712) 563-2631

Other

## Goals & Objectives

Purpose of Burn

Short-term goal

Long-term goal

## **Fuel Considerations**

Surface (grass, litter, downed trees, slash)

Ladder fuels (vines, dead trees, shrubs)

Aerial/Crown (Live trees, primarily conifers)

Structures

Site Topography (slope, aspect, hazards) - indicate these on site map

Fire Breaks - indicate on map

## **Surrounding Area Considerations**

Previous Burn Mgmt. (Date of last fire, results of last fire, problems encountered on last fire)

Description of adjacent area (if significantly different fuels, topography, etc.)

Special Considerations (plants, animals, safety, public agreement)

Hazards (power lines, gas lines, well, impassable fences, rocky ground)

Closest water source (type & distance)

## **Site Preparation**

Natural Fire Breaks (road, crop, field, waterway, other) show on map (Length, width)

Firebreak Construction (plow line, hand line, mowed, other)(Length, width)

## **Organization (Personnel)**

Prescribed Fire Manager (Name, cell phone, medical Issues)

Prescribed Fire Boss (Name, cell phone, medical issues)

Prescribed Fire Holding Boss (Name, cell phone, medical issues)

Burn personnel (Name, cell phone, medical issues)

Burn Personnel (Name, cell phone, medical issues)

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Burn Personnel (Name, cell phone, medical issues)

Holding Personnel (Name, cell phone, medical issues)

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## Equipment Requirements (Fire Suppression)

### Fire Equipment Needs

- Type 1 / 2 Engine - Structure (Quantity\_\_\_\_\_)
- Type 6 Engine - Brush Truck (Quantity\_\_\_\_\_)
- Type 7 Engine - UTV with SKID (Quantity\_\_\_\_\_)
- Type 3 Tender 1001 to 2000 (Quantity\_\_\_\_\_)
- Type 2 Tender 2001 to 3000 (Quantity\_\_\_\_\_)
- Type 1 Tender 3001 to 5000 (Quantity\_\_\_\_\_)
- Drip Torch 1
- Drip Torch 2
- Quick Launcher II
- Hot Shot Flares
- Stubby Flares
- Chubbie Grenade
- Big Shot Grenade

### Personal Protective Equipment (PPE)

- Eye Protection
- First Aid Kit
- Hard Hat
- Leather Gloves
- Nomex/PBI pants
- Nomex/PBI shirt
- Fire Shelter
- Radio
- Leather Boots
- Water (Drinking)
- Other

## Hand Tools / Special Equipment

Axe

Flappers

Hoe

Pulaski

Rake

Shovel

Chain Saw

Back Pack Pump

Choice 1

Other



## Prescription

Season / Month

Preferred time of ignition:

Temperature

Relative humidity

Wind Speed

Max

Min

Max

Min

Max

Min

Wind Direction

Days since last precipitation

## Smoke Management Plan

Preferred wind direction and speed

Roads near burn

Smoke sensitive areas (confinements, airports, buildings with managed HVAC)

Residences

Noxious Smoke (Poison Ivy)

Moisture of Extinction

Fine Dead Fuel Moisture

Yes

No

# Ignition and Holding Plan

## Pre-Burn Contacts

NWS-Valley Nebraska 1-800-452-9074  
NWS 24 hour Prior on line spot forecast  
County PSAP  
Local Residence (3 Mile Alert Iowa)  
Cooperating Agencies  
Fire District Chief - local department  
Local Law Enforcement  
Other

## Weather Day of Burn

|                |                   |             |                   |
|----------------|-------------------|-------------|-------------------|
| Sky            | Precipitation     |             |                   |
| Wind Direction | Wind Speed / Gust | Temperature | Relative Humidity |

Firing Techniques (ignition sequence, firing pattern, personnel, safety precautions)

## Go / No Go Checklist

Are all fire prescriptions met?

Yes

No

Is the weather forecast favorable now and throughout the burn?

Yes

No

Are all necessary lines constructed and checked?

Yes

No

Are all needed personnel on-site?

Yes

No

Have all personnel been briefed on the prescribed burn?

Yes

No

Have all personnel been briefed on safety hazards, lookouts, communications, escape routes, and safety zones?

Yes

No

Do all personnel have required PPE?

Yes

No

Is all required equipment in place, tested, and working?

Yes

No

Do you have direct communications lines established?

Yes

No

Do you have access to adequate water?

Yes

No

Do you have all keys and gate access?

Yes

No

Have you made all necessary notifications?

Yes

No

In your opinion can the burn be carried out according to the plan and will it meet planned objectives?

Yes

No

Contingency Plan & Resources

Mop up plan

## Signatures

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Prescribed Fire Planner:

Date:

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Prescribed Fire Manager:

Date:

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Landowner:

Date:

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Fire Chief:

Date: