



NM FORESTRY DIVISION INCIDENT REPORT

Person receiving report _____
Date _____ Time _____
Reported by _____
Phone No. _____
District Fire No. _____
Incident Order No. _____
Fire Code _____

INCIDENT DETAILS:

Fire Name: _____

Fire Start Date: _____ Time: _____

Reported to Zone Date: _____ Time: _____

General Location of Fire: _____

IC's Name: _____ County: _____ ISO Fire District: _____

IA Area: USFS BLM State Other Federal Reimbursable to: NMSF Federal Agency Cost Share

Ownership: Private State Federal Unknown Other Public Radio Frequency: _____

Forest Cover Type:(check one)

- | | | | | |
|---|--|---|---|-------------------------------------|
| <input type="checkbox"/> Bosque | <input type="checkbox"/> Brush | <input type="checkbox"/> Grass | <input type="checkbox"/> Mixed Conifer | <input type="checkbox"/> Other |
| <input type="checkbox"/> Other Woodland | <input type="checkbox"/> Piñon/Juniper | <input type="checkbox"/> Ponderosa Pine | <input type="checkbox"/> Ponderosa Pine/Fir | <input type="checkbox"/> Spruce/Fir |

Fuel Type– (what actually burned): (check one)

- | | | | | |
|--------------------------------|---|--|--------------------------------|---------------------------------------|
| <input type="checkbox"/> Brush | <input type="checkbox"/> Cropland | <input type="checkbox"/> Duff | <input type="checkbox"/> Grass | <input type="checkbox"/> Improvements |
| <input type="checkbox"/> Snag | <input type="checkbox"/> Timber Overstory | <input type="checkbox"/> Timber Understory | <input type="checkbox"/> Trash | |

General Cause: (check one)

- | | | | | | |
|--|--|---|--|---|--|
| <input type="checkbox"/> Lightning (LT) | <input type="checkbox"/> Spontaneous Combustion (SC) | <input type="checkbox"/> Aircraft (AC) | <input type="checkbox"/> Building (BD) | <input type="checkbox"/> Campfire (CF) | <input type="checkbox"/> Children (CH) |
| <input type="checkbox"/> Fireworks (FW) | <input type="checkbox"/> Flares/Oil and Gas (FL) | <input type="checkbox"/> Hot Ashes (HA) | <input type="checkbox"/> Incendiary (IN) | <input type="checkbox"/> Powerline (PL) | <input type="checkbox"/> Railroad (RR) |
| <input type="checkbox"/> Equipment Use EU) | <input type="checkbox"/> Debris Burning DB) | <input type="checkbox"/> Smoking (SM) | | | |
| <input type="checkbox"/> Other (Specify) _____ | | | | | |

Specific Cause: (check one if cause needs to be further defined)(General Cause to be used with Specific Cause is in parenthesis)

- | | | | | |
|--|--|---|---|---|
| <input type="checkbox"/> Cooking Fire (CF) | <input type="checkbox"/> Trash (DB) | <input type="checkbox"/> Ditch Burning (DB) | <input type="checkbox"/> Field Burning (DB) | <input type="checkbox"/> Fuels Reduction (DB) |
| <input type="checkbox"/> Land Clearing (DB) | <input type="checkbox"/> Brakeshoe/U-Joint (EU) | <input type="checkbox"/> Range Burning (DB) | <input type="checkbox"/> Slash Disposal (DB) | <input type="checkbox"/> Weed Burning (DB) |
| <input type="checkbox"/> Mill Waste (DB) | <input type="checkbox"/> Burning Vehicle (EU) | <input type="checkbox"/> Exhaust (EU) | <input type="checkbox"/> Fuel Sparks (EU) | <input type="checkbox"/> Electric Fence (EU) |
| <input type="checkbox"/> Branding (EU) | <input type="checkbox"/> Welder/Cutting Torch (EU) | <input type="checkbox"/> Logging/Sawmill (EU) | <input type="checkbox"/> Blasting/Mining (EU) | |
| <input type="checkbox"/> Other (Specify) _____ | | | | |

Fire Danger:

- Low Medium High Very High Extreme

Structures Threatened: _____ (number and type)

Wildland Urban Interface Area: Yes No Other Values at Risk: _____

Fire Location: T. _____ R. _____ Section _____ 1/4Section _____

and/or Latitude _____ Longitude _____

Acreeage Burned by Land Ownership: (number of acres in blanks)

BIA _____ BLM _____ FWS _____ NPS _____ Private _____ State _____ USFS _____ Other (specify) _____

Fire Reported By:

- | | | | | |
|----------------------------------|--|--|--|---|
| <input type="checkbox"/> BIA | <input type="checkbox"/> Motorist | <input type="checkbox"/> Private Plane (FAA) | <input type="checkbox"/> Fire Detection Aircraft | <input type="checkbox"/> US Fish and Wildlife |
| <input type="checkbox"/> BLM | <input type="checkbox"/> Municipal Fire Department | <input type="checkbox"/> State Forestry | <input type="checkbox"/> National Park Service | <input type="checkbox"/> Police |
| <input type="checkbox"/> Private | <input type="checkbox"/> Rural Fire Department | <input type="checkbox"/> Federal Fire Tower | <input type="checkbox"/> US Forest Service | <input type="checkbox"/> Other |

RESOURCE INFORMATION:

Resources: Part I – Initial Attack Response

Initial Attack Fire Department or Agency	Date	Initial Attack Time	Acres at Initial Attack	Contained Time	Controlled Time	Acres when Controlled	Out Time and Date

Resources: Part II – Other Resources

Agency / Fire Dept	Resource ID & Type	# of Personnel	Date	Dispatch Time	Back at Station Time

FIRE WEATHER AND BEHAVIOR:

Fire Effects

- Greatly Beneficial
 Light Damage
 Medium Damage
 Heavy Damage
 Severe Damage
 Unknown

Fuel Model

- A-Annual Grass
 B-Dense Mature Brush
 C-Open Ponderosa Pine
 F-Oak Brush-Mixed Chaparral
 G-Over Mature Mixed Conifer
 H-Young Mixed Conifer
 I-Clear Cut Slash (6" Dia., 25 T/AC)
 J-Heavy Slash (6" Dia., 25 T/AC)
 K-Moderate Slash (All, 15 T/AC)
 L-Perennial Grass
 O-Unknown
 T-Moderate Brush (1/3 Sagebrush)
 U-Closed

Flame Length _____ (feet)

Slope Code

- 0-0
 0-25
 26-40
 41-55
 56-75
 75-200

Spread Rate

- none
 Low 0-5
 Moderate 6-10
 High 11-50
 Very High 51 +

Aspect Code

- Flat
 North
 Northeast
 East
 Southeast
 South
 Southwest
 West
 Northwest
 Ridgetop
 Unknown

Elevation _____ (feet)

Day's Temperature _____ (°F)

Relative Humidity _____ %

Wind Speed _____ (peak MPH)

Wind Direction

- North
 Northeast
 East
 Southeast
 South
 Southwest
 West
 Northwest

FBIA (Fire Behavior on Initial Attack)

- Creeping/Spreading
 Crowning
 Crowning/Spreading
 Erratic Behavior
 Running
 Running/Spotting
 Smoldering
 Torching
 Unknown

