

**DI 1202 Submission Date:**

**Special Problems:**

**See attached Go-No-Go checklist.**

### **Prescribed Burn Briefing Outline**

#### **I. Burn Organization**

- A. Organizational Chart/Personnel Assignments
- B. Equipment Assignments
- C. Other Resources

#### **II. Burn Objectives**

#### **III. Description of Burn Area**

- A. Review Map of Burn/Topographical Features/Acreage
- B. Values at Risk
- C. Problem Areas
- D. Fuel Type (Both Inside and Outside the Burn Unit)
- E. Roads/Access
- F. Water Sources
- G. Natural/Manmade Barriers

#### **IV. Expected Weather**

- A. Wind Direction and Speed
- B. Relative Humidity
- C. Temperature
- D. Fuel Moisture
- E. Atmospheric Stability
- F. Predicted Changes

#### **V. Communications**

- A. Procedures
- B. Frequencies/Channels
  - 1. Burn Crew
  - 2. Dispatch
  - 3. Cooperators
  - 4. Others

#### **VI. Firing Sequence**

- A. Test Burn
- B. Ignition Equipment (Type, Number, Etc.)
- C. Pattern and Sequence of Firing (Map)

#### **VII. Contingency Plan**

- A. Slop Over vs. Escape
- B. Assignments/Organizational Chart
- C. Strategy
- D. Tactics

#### **VIII. Safety**

- A. Inspect Personal Protective Equipment

- B. Lookouts, Escape Routes and Safety Zones
- C. Hazards (Footing, Natural, Man made, Smoke [visibility], Etc.)
- D. Potential Problems
- E. Other (Air Operations, Flammable Fuel Handling, Etc.)

**GO-NO-GO CHECKLIST**

Unit: Sifford Pasture

- Yes\_\_\_ No\_\_\_ Do you have an **APPROVED** prescribed fire plan?
- Yes\_\_\_ No\_\_\_ Are **ALL** fire prescription elements met?
- Yes\_\_\_ No\_\_\_ Are **ALL** smoke management specifications met?
- Yes\_\_\_ No\_\_\_ Are **ALL** permits and clearances obtained?
- Yes\_\_\_ No\_\_\_ Has an area spot weather forecast been obtained and is it favorable?
- Yes\_\_\_ No\_\_\_ Are **ALL** required personnel in the prescribed fire plan on site?
- Yes\_\_\_ No\_\_\_ Has the contingency planning process adequately considered fuels adjacent to and within a reasonable proximity to the burn area?
- Yes\_\_\_ No\_\_\_ Has the availability of **ALL** contingency resources been checked, and are they available?
- Yes\_\_\_ No\_\_\_ Have **ALL** personnel been briefed on the project objectives and their assignment?
- Yes\_\_\_ No\_\_\_ Have **ALL** personnel been briefed on their safety hazards, escape routes, and safety zones?
- Yes\_\_\_ No\_\_\_ Have **ALL** the required notifications been made?
- Yes\_\_\_ No\_\_\_ Are the on-site holding forces adequate for containment under the expected conditions?
- Yes\_\_\_ No\_\_\_ In **YOUR OPINION**, can the prescribed fire meet the planned objectives, and can it be carried out according to the approved plan?

I certify that I have reviewed the burn objectives and that I am in agreement that the Prescribed Fire Complexity Analysis is correct and that all the above questions were answered "YES."

\_\_\_\_\_  
Prescribed Fire Burn Boss

\_\_\_\_\_  
Date

\_\_\_\_\_  
Refuge Manager

\_\_\_\_\_  
Date

Proceed with a test fire and document the current conditions, location, and results.

**VIII: CRITIQUE OF BURN**

**Were Burn Objectives Within Acceptable Range of Results:**

**What Would be Done Differently to Obtain Better Results:**

**Was There Any Deviation from Plans (why):**

**Problems and general Comments:**

**IX. POST BURN MONITORING**

**Visual Inspection - Date: \_\_\_\_\_**

**Length of Time After Burn: \_\_\_\_\_**

**Vegetative Transacts:**

**Comments on Habitat Conditions, etc.:**

**Photo Documentation:**

**Other:**

**X. FOLLOW-UP EVALUATION**

**Follow-up Date: \_\_\_\_\_ Refuge Burn Number: \_\_\_\_\_**

**Length of Time After Burn:**

**Vegetative Transects:**

**Comments on Habitat Condition:**

**Photo Documentation:**

**Other:**

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## Appendix B: Prescribed Fire Plan Template

A standardized, reproducible template form for the Prescribed Fire Plan development process is included in this appendix. A standardized format is provided for the Prescribed Fire Plan in PDF. An electronic version editable in Word is also available. Users should prepare the plan using the electronic version.

In the electronic Word version, the Project Name and/or Unit Name should be entered in the document's header which will automatically appear on each following page of the plan.

To insert information into the document's header:

1. Double-click in the header region (upper region of each page displayed on the screen).
2. Type Project and/or Unit information.
3. Double-click *outside* the header region in the body of the document.

You may also access the header under **View > Headers and Footers**. This will open the header region for edits automatically. After entering the information, go again to **View > Headers and Footers** which will return you to being able to enter information into the body of the document.

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**PRESCRIBED FIRE PLAN**

**ADMINISTRATIVE UNIT(S):** \_\_\_\_\_

**PRESCRIBED FIRE NAME:** \_\_\_\_\_

**PREPARED BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Name & Qualification**

**TECHNICAL REVIEW BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Name & Qualification**

**COMPLEXITY RATING:** \_\_\_\_\_

**APPROVED BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Agency Administrator**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**ELEMENT 2: AGENCY ADMINISTRATOR PRE-IGNITION APPROVAL CHECKLIST**

Instructions: The Agency Administrator’s Pre-Ignition Approval is the intermediate planning review process (i.e. between the Prescribed Fire Complexity Rating System Guide and Go/No-Go Checklist) that should be completed before a prescribed fire can be implemented. The Agency Administrator’s Pre-Ignition Approval evaluates whether compliance requirements, Prescribed Fire Plan elements, and internal and external notifications have been or will be completed and expresses the Agency Administrator’s intent to implement the Prescribed Fire Plan. If ignition of the prescribed fire is not initiated prior to expiration date determined by the Agency Administrator, a new approval will be required.

YES	NO	KEY ELEMENT QUESTIONS
		Is the Prescribed Fire Plan up to date? <i>Hints: amendments, seasonality.</i>
		Will all compliance requirements be completed? <i>Hints: cultural, threatened and endangered species, smoke management, NEPA.</i>
		Is risk management in place and the residual risk acceptable? <i>Hints: Prescribed Fire Complexity Rating Guide completed with rational and mitigation measures identified and documented?</i>
		Will all elements of the Prescribed Fire Plan be met? <i>Hints: Preparation work, mitigation, weather, organization, prescription, contingency resources</i>
		Will all internal and external notifications and media releases be completed? <i>Hints: Preparedness level restrictions</i>
		Will key agency staff be fully briefed and understand prescribed fire implementation?
		Are there any other extenuating circumstances that would preclude the successful implementation of the plan?
		Have you determined if and when you are to be notified that contingency actions are being taken? Will this be communicated to the Burn Boss?
		Other:

Recommended by: \_\_\_\_\_ Date: \_\_\_\_\_  
FMO/Prescribed Fire Burn Boss

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Agency Administrator

Approval expires (date): \_\_\_\_\_

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**ELEMENT 2: PRESCRIBED FIRE GO/NO-GO CHECKLIST**

<p><b>A.</b> Has the burn unit experienced unusual drought conditions or contain above normal fuel loadings which were not considered in the prescription development? If <b>NO</b> proceed with checklist., if <b>YES</b> go to item B.</p>	<b>YES</b>	<b>NO</b>
<p><b>B.</b> If <b>YES</b> have appropriate changes been made to the Ignition and Holding plan and the Mop Up and Patrol Plans? If <b>YES</b> proceed with checklist below, if <b>NO</b> STOP.</p>		

YES	NO	QUESTIONS
		Are ALL fire prescription elements met?
		Are ALL smoke management specifications met?
		Has ALL required current and projected fire weather forecast been obtained and are they favorable?
		Are ALL planned operations personnel and equipment on-site, available, and operational?
		Has the availability of ALL contingency resources been checked, and are they available?
		Have ALL personnel been briefed on the project objectives, their assignment, safety hazards, escape routes, and safety zones?
		Have all the pre-burn considerations identified in the Prescribed Fire Plan been completed or addressed?
		Have ALL the required notifications been made?
		Are ALL permits and clearances obtained?
		In your opinion, can the burn be carried out according to the Prescribed Fire Plan and will it meet the planned objective?

**If all the questions were answered "YES" proceed with a test fire. Document the current conditions, location, and results**

\_\_\_\_\_

Burn Boss

\_\_\_\_\_

Date

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**ELEMENT 3 COMPLEXITY ANALYSIS SUMMARY**

<b>PRESCRIBED FIRE NAME</b>			
<b>ELEMENT</b>	<b>RISK</b>	<b>POTENTIAL CONSEQUENCE</b>	<b>TECHNICAL DIFFICULTY</b>
1. Potential for escape			
2. The number and dependence of activities			
3. Off-site Values			
4 On-Site Values			
5. Fire Behavior			
6. Management organization			
7. Public and political interest			
8. Fire Treatment objectives			
9 Constraints			
10 Safety			
11. Ignition procedures/ methods			
12. Interagency coordination			
13. Project logistics			
14 Smoke management			

<b>COMPLEXITY RATING SUMMARY</b>	
	<b>OVERALL RATING</b>
<b>RISK</b>	
<b>CONSEQUENCES</b>	
<b>TECHNICAL DIFFICULTY</b>	
<b>SUMMARY COMPLEXITY DETERMINATION</b>	
<b>RATIONALE:</b>	

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**ELEMENT 4: DESCRIPTION OF PRESCRIBED FIRE AREA**

**A. Physical Description**

1. Location:
2. Size:
3. Topography:
4. Project Boundary:

**B. Vegetation/Fuels Description:**

1. On-site fuels data
2. Adjacent fuels data

**C. Description of Unique Features:**

**ELEMENT 5: GOALS AND OBJECTIVES**

**A. Goals:**

**B. Objectives:**

1. Resource objectives:
2. Prescribed fire objectives:

**ELEMENT 6: FUNDING:**

**A. Cost:**

**B. Funding source:**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**ELEMENT 7: PRESCRIPTION**

**A. Environmental Prescription:**

**B. Fire Behavior Prescription:**

**ELEMENT 8: SCHEDULING**

**A. Ignition Time Frames/Season(s):**

**B. Projected Duration:**

**C. Constraints:**

**ELEMENT 9: PRE-BURN CONSIDERATIONS**

**A. Considerations:**

1. On Site:

2. Off Site

**B. Method and Frequency for Obtaining Weather and Smoke Management Forecast(s):**

**C. Notifications:**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

### **ELEMENT 10: BRIEFING**

**Briefing Checklist:**

Burn Organization

Burn Objectives

Description of Burn Area

Expected Weather & Fire Behavior

Communications

Ignition plan

Holding Plan

Contingency Plan

Wildfire Conversion

Safety

### **ELEMENT 11: ORGANIZATION AND EQUIPMENT**

**A. Positions:**

**B. Equipment:**

**C. Supplies:**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**ELEMENT 12: COMMUNICATION**

**A. Radio Frequencies**

1. Command Frequency(s):
2. Tactical Frequency(s):
3. Air Operations Frequency(s):

**B. Telephone Numbers:**

**ELEMENT 13: PUBLIC AND PERSONNEL SAFETY, MEDICAL**

**A. Safety Hazards:**

**B. Measures Taken to Reduce the Hazards:**

**C. Emergency Medical Procedures:**

**D. Emergency Evacuation Methods:**

**E. Emergency facilities:**

**ELEMENT 14 TEST FIRE**

**A. Planned location:**

**B. Test Fire Documentation:**

1. Weather conditions On-Site:
2. Test Fire Results:

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**ELEMENT 15: IGNITION PLAN**

**A. Firing Methods:**

**B. Devices:**

**C. Techniques:**

**D. Sequences:**

**E. Patterns:**

**F. Ignition Staffing:**

**ELEMENT 16: HOLDING PLAN**

**A. General Procedures for Holding:**

**B. Critical Holding Points and Actions:**

**C. Minimum Organization or Capabilities Needed:**

**ELEMENT 17: CONTINGENCY PLAN**

**A. Trigger Points:**

**B. Actions Needed:**

**C. Additional Resources and Maximum Response Time(s):**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**ELEMENT 18: WILDFIRE CONVERSION**

**A. Wildfire Declared By:**

**B. IC Assignment:**

**C. Notifications:**

**D. Extended Attack Actions and Opportunities to Aid in Fire Suppression:**

**ELEMENT 19: SMOKE MANAGEMENT AND AIR QUALITY**

**A. Compliance:**

**B. Permits to be Obtained:**

**C. Smoke Sensitive Areas/Receptors:**

**D. Impacted Areas:**

**E. Mitigation Strategies and Techniques to Reduce Smoke Impacts:**

**ELEMENT 20: MONITORING**

**A. Fuels Information (forecast and observed) Required and Procedures:**

**B. Weather Monitoring Required and Procedures:**

**C. Fire Behavior Monitoring Required and Procedures:**

**D. Monitoring Required To Ensure That Prescribed Fire Plan Objectives Are Met:**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**E. Smoke Dispersal Monitoring Required and Procedures:**

**ELEMENT 21: POST-BURN ACTIVITIES**

**Post-burn Activities That Must be Completed:**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

## **APPENDICES**

- A. Maps: Vicinity and Project**
- B. Technical Review Checklist**
- C. Complexity Analysis**
- D. Job Hazard Analysis**
- E. Fire Behavior Modeling Documentation or Empirical Documentation (unless it is included in the fire behavior narrative in Element 7; Prescription)**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**A: MAPS**

**1. Vicinity Map:**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**2. Project Map:**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**C. TECHNICAL REVIEWER CHECKLIST**

<b>PRESCRIBED FIRE PLAN ELEMENTS:</b>	<b>S / U</b>	<b>COMMENTS</b>
1. Signature page		
2. GO/NO-GO Checklists		
3. Complexity Analysis Summary		
4. Description of the Prescribed Fire Area		
5. Goals and Objectives		
6. Funding		
7. Prescription		
8. Scheduling		
9. Pre-burn Considerations		
10. Briefing		
11. Organization and Equipment		
12. Communication		
13. Public and Personnel Safety, Medical		
14. Test Fire		
15. Ignition Plan		
16. Holding Plan		
17. Contingency Plan		
18. Wildfire Conversion		
19. Smoke Management and Air Quality		
20. Monitoring		
21. Post-burn Activities		
Appendix A: Maps		
Appendix B: Complexity Analysis		
Appendix C: JHA		
Appendix D: Fire Prediction Modeling Runs		
Other		

S = Satisfactory                      U = Unsatisfactory

**Recommended for Approval:** \_\_\_\_\_                      **Not Recommended for Approval:** \_\_\_\_\_  
 \_\_\_\_\_  
 Technical Reviewer                      Qualification and currency (Y/N)                      Date

€ Approval is recommended subject to the completion of all requirements listed in the comments section, or on the Prescribed Fire Plan.

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**C: COMPLEXITY ANALYSIS**

**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**D. JOB HAZARD ANALYSIS**

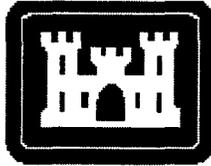
**Project Name:** \_\_\_\_\_

**Unit Name:** \_\_\_\_\_

**E. FIRE BEHAVIOR MODELING DOCUMENTATION OR EMPIRICAL  
DOCUMENTATION**

## 4.7 U.S. Army Corp of Engineers Burn Plans

**U.S. ARMY CORPS OF ENGINEERS**  
**HARRY S. TRUMAN DAM & RESERVOIR**  
**PRESCRIBED BURN PLAN**



<b>PROJECT DESCRIPTION</b>	
<b>Area/Field, Stand or Unit No.:</b>	Browington Switchgrass Lease Unit D-15/16
<b>Prepared by:</b>	Jason Hurley
<b>Date:</b>	NOV-9-2006
<b>RX Burn Boss approval:</b>	<b>Date:</b>
<b>Location description (attach map):</b>	Henry Co. T40 - R25W - Section 17,18,20
<b>Acreage:</b>	160
<b>Site description:</b>	native switchgrass prairie, annual weeds, woody invasion.
<b>Sensitive areas:</b>	Private pasture and the village of Browington to the west; private wooded property to the south
<b>Risk Assessment Value (attach Risk Assessment Worksheet):</b>	15

<b>PRESCRIPTION</b>			
<b>Burn objectives:</b> To burn >95% of the unit. Top kill 85% of woody plants <5ft tall. Stimulate native forb growth for the following growing season.			
<b>Preferred timing:</b> Feb. 15 <sup>th</sup> to May 15 <sup>th</sup> .			
<b>Desired fire behavior:</b> Use a ring head fire method to burn the unit. > 95% of fuel is consumed.			
<b>Conditions needed:</b>			
		Range	Ideal
	Temperature	40 – 80 deg. F.	65
	Relative humidity	25 – 50%	35%
	1 hr. fuel moisture	3 – 7%	5%
	10 hr. fuel moisture		
	Midflame windspeed	3 - 15	8
	Wind direction	Any except east	Southwest

<b>Smoke management:</b> Desired atmospheric conditions: Unstable atmospheric conditions preferred for smoke dispersal. Mixing height (>1650' recommended): Ventilation rate (>6000 m <sup>3</sup> /sec recommended): Air quality restrictions that apply: <b>None for Henry Co.</b>
<b>Firelines:</b> Wheat or mowed fireline along west perimeter, lake on the north and east side, county road on the south side.
<b>Adjacent fuels:</b> Native mixed prairie and the village of Browington on the west. Private wooded property on the south. Lake on the north and east

<b>PROJECT RESOURCES</b>	
<b>Prescribed Fire Burn Boss:</b>	Jason Hurley
<b>Crew size:</b>	Four + (4)
<b>Ignition/holding crew(s):</b>	2 crews with 2 members on each crew

<b>Suppression crew(s):</b> none		
<b>Other crew members:</b> Mop-up will be done by the same crews after the unit is burned.		
<b>Hand equipment:</b>	<b>Number</b>	<b>Assignment</b>
Drip torches	2	Hurley, Smith
Backpack pumps	2	Cordrey, Abdoler
Swatters	0	
Broom rakes	4	Hurley, Smith, Cordrey, Abdloer
Chainsaws	1	Smith
Backpack blowers	2	Hurley, Smith
Weather kit or Kestral	1	Hurley
Other:		
<b>Mechanized equipment:</b>	<b>Number</b>	<b>Assignment</b>
ATVs	0	
Tractor/Gator	1	Hurley, Smith
Pickup with water unit	1	Hurley
Dozer	0	
ATV water unit	2	Abdoler, Cordrey
Pulled water unit	0	
Other:		
<b>Other equipment:</b>	<b>Number</b>	<b>Assignment</b>
Matches	Each crew member	Hurley
Portable radios	Each crew member	Hurley
Blower fuel	2 gal.	Hurley
Drip torch fuel	15 gal.	Hurley
Bolt cutters	1	Hurley
Pliers	4	Hurley, Smith, Cordrey, Abdoler
Drinking water	3 gal.	Hurley
Food	0	
Compass	1	Hurley
Aerial photos, maps, topos	2	Hurley
First aid kits	1	Hurley
Cell phone	1	Hurley
Other:		

### LOGISTICS

**Weather monitoring:** Forecast day before planned burn. On-site weather just prior to ignition.

**Public notifications:**

VFDs: Deepwater (660) 696-2722  
Henry County Sheriffs Department (660) 885-5587  
MDC –Camdenton Forestry Dispatch (573)346-2210 Pat x221  
Other adjacent land owners

**Ignition plan (attach map):** Ignition will begin at point “A to B” to establish a black line. Crew 1 will fire towards “C” and crew 2 will fire towards “B” meeting in the middle. Upon Completion of field 1 move to field 2 and begin fire at point “B to E” to establish a black line. Crew 1 will run fire from “E to F”

**Contingency plans:**

Fire out of prescription: After fire is ignited, crews will adjust to weather changes as necessary  
Minor escapes (spotovers): Holding crews will handle spot fires.  
Moderates escapes: Firing crews will be notified of the escape. Further ignition will cease. Firing crews, as needed, will assist holding crews to extinguish the escaped fire.  
Major escape: Ignition will cease. One member from each firing crew will serve as holding crew for the prescribed burn. The remaining burn crew will take action to suppress the escaped fire. Back-up resources will be notified and measures will be taken to contain the fire within the Dept. area.

<b>BURN PLAN REVIEW AND APPROVAL</b>	
Low risk assessment (value 8-13) – Operations Manager or Park Manager	
Signature:	Date:
Moderate risk assessment (value 14-22) – Operations Manager or Park Manager	
Signature:	Date:
High risk assessment (value 23+) – Operations Manager or Park Manager	
Signature:	Date:
<b>RE-APPROVAL**</b>	
I certify that this burn plan is still valid and the risk criteria (new construction, fuels, etc.) have not changed.	
RXBB Signature:	Date:
I certify that this burn plan is still valid and the risk criteria (new construction, fuels, etc.) have not changed.	
RXBB Signature:	Date:
I certify that this burn plan is still valid and the risk criteria (new construction, fuels, etc.) have not changed.	
RXBB Signature:	Date:
I certify that this burn plan is still valid and the risk criteria (new construction, fuels, etc.) have not changed.	
RXBB Signature:	Date:

\*\* A burn plan may be used for repeat burns of an area without rewrite if the Prescribed Fire Burn Boss certifies that the plan is still valid and none of the risk assessment criteria (such as new construction or developments, fuel type, smoke impacts, etc.) have changed.

# DAY OF BURN CHECKLIST

**Area/Field, Stand or Unit No.:**

**Date:**

**Burn Day Checklist (Go/No Go):**  
Refer to contents of Burn Plan

\_\_\_\_\_ Notifications made

\_\_\_\_\_ All equipment present and in working order

\_\_\_\_\_ Personnel on site with proper personal protective equipment

\_\_\_\_\_ Personnel briefed on procedures and contingencies

\_\_\_\_\_ Personnel briefed on communications and safety zones

\_\_\_\_\_ Backup resources available

\_\_\_\_\_ Weather within prescription      Time: \_\_\_\_\_

Wind speed: \_\_\_\_\_ Direction: \_\_\_\_\_

Temperature: \_\_\_\_\_ RH: \_\_\_\_\_

\_\_\_\_\_ First aid kits fully stocked

Emergency medical services: Nevada Reg. Medical Center      417- 667-3355  
Name      Phone

I certify that all items on the checklist are "go" for the burn:

---

Prescribed Fire Burn Boss

# POST-BURN EVALUATION

## Weather

Pre-burn Time: \_\_\_\_\_  
Temperature: \_\_\_\_\_  
Relative humidity: \_\_\_\_\_  
Windspeed: \_\_\_\_\_  
Direction: \_\_\_\_\_

Post-burn Time: \_\_\_\_\_  
Temperature: \_\_\_\_\_  
Relative humidity: \_\_\_\_\_  
Windspeed: \_\_\_\_\_  
Direction: \_\_\_\_\_

## Fire behavior

Rate-of-spread: \_\_\_\_\_  
Flame lengths: \_\_\_\_\_

Circumstances of any erratic fire behavior:

Smoke dispersal during burn:

Percent of area burned:

Amount of fuel consumed:

Any public interest during burn – pro or con:

## RISK ASSESSMENT AND REVIEW LEVEL WORKSHEET

Record score for each criterion, total numerical value, refer to chart to determine review level, attach worksheet to burn plan, initiate review process.

Assessment prepared by: Jason Hurley  
(Name)

11-9-06  
(Date)

for: Brownington Swithcgrass LU D-15/16  
(Area)

160  
(Burn Acres)

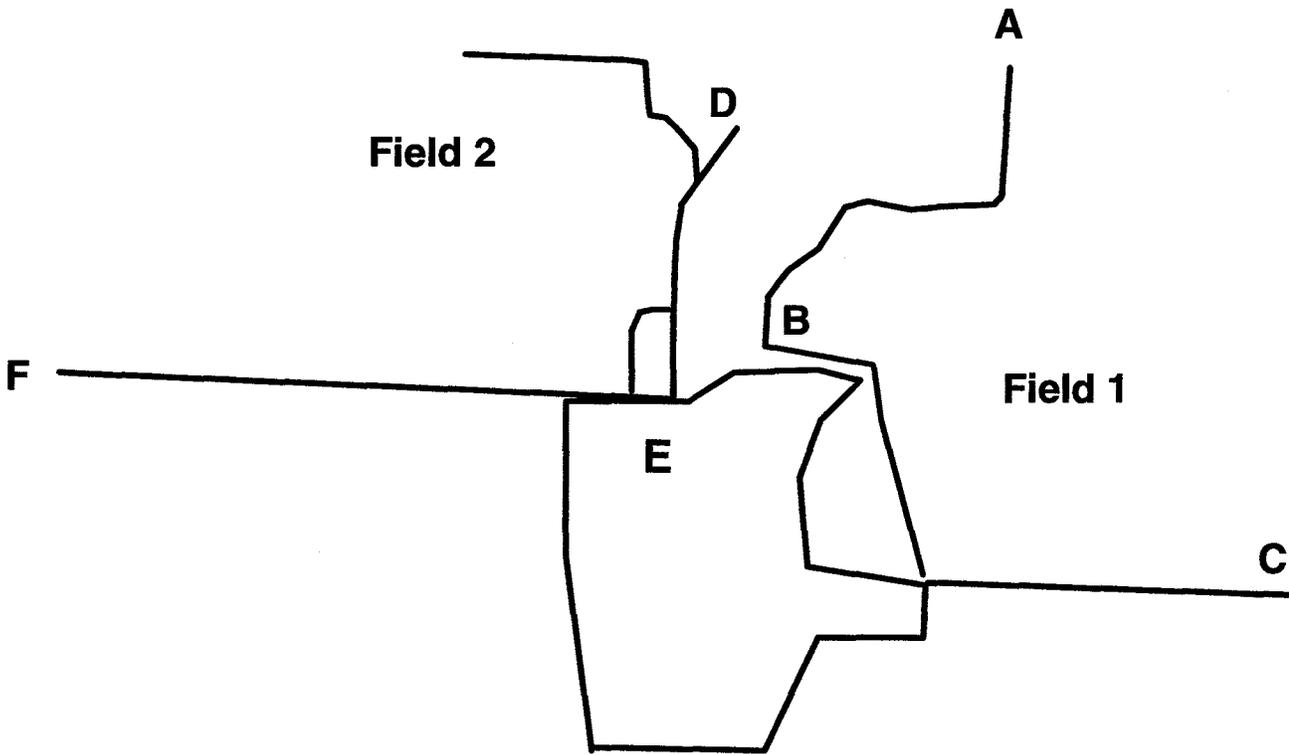
ASSESSMENT CRITERIA	VALUE				Score
	1	2	3	4	
<b>FUEL TYPE</b> (Based on BEHAVE fuel models. Select the fuel type with the highest value)	Herbaceous or herbaceous dominated, Models 1-3	Old field or shrub dominated, Models 4-7	Timber litter; branches and leaves, Models 8-10	Slash, Models 11-13	1
<b>SIZE OF BURN AREA*</b> (acres)	≤ 80 ac.	81-160 ac.	161-320 ac.	>320 ac.	2
<b>ESCAPE POTENTIAL</b>	No adjacent fuel	Adjacent fuel with low ignition probability	Adjacent fuel with moderate ignition probability	Adjacent fuel with high ignition probability	3
<b>ADJOINING HAZARDS</b>	No adjoining private land or high value resources	Adjoining private land, but no high value resources	High value developments within 1/4-1/2 mile	High value developments within 1/4 mile	3
<b>TOPOGRAPHY</b>	Topography flat to gently rolling, 0-10% slopes	Topography gentle to moderate, 11-20% slopes	Topography moderate to severe, 21-30% slopes	Topography severe, slopes often >30%	1
<b>POTENTIAL IMPACT OF SMOKE ON TRAFFIC</b>	No impact	1/4-1/2 mile from secondary roads	<1/2 mile from major highway or <1/4 mile from secondary roads	<1/4 mile from major highway	2
<b>IMPACT OF SMOKE ON RESIDENTIAL, INDUSTRIAL OR HIGH PUBLIC USE AREAS*</b>	No impact	Isolated residences. Low public use.	Small rural community or groups of dwellings. Moderate public use	Large residential area or industrial site. High public use.	3
<b>PLANNING</b>	Approved area plan with site specific burn objectives; OR previously approved burn unit; OR private land with approved burn plan**	Area plan approved or in progress. Burning identified as an approved management practice.	Area plan approved or in progress. Burning not mentioned as an approved management practice.	No area plan approved or in progress	1
				<b>Total Assessment Value</b>	<u>15</u>

### REQUIRED REVIEW AND APPROVAL

**Low Risk:** Assessment Value 8-13  
**Moderate Risk:** Assessment Value 14-22  
**High Risk:** Assessment Value >22

# LU D-15/16 Burn Map

Green = Road/Trail  
Blue = Town  
Black = mowed/green line



**PRESCRIBED BURN PLAN**

LANDOWNER/OPERATOR Mark Twain Lake DATE: \_\_\_\_\_  
ACRES TO BURN \_\_\_\_\_ PLANNED DATE FOR BURN \_\_\_\_\_  
LOCATION: COMPARTMENT NO. \_\_\_\_\_ TRACT NO. \_\_\_\_\_ FIELD NO. \_\_\_\_\_  
TOWNSHIP \_\_\_\_\_ RANGE \_\_\_\_\_ SECTION \_\_\_\_\_

**A. DESCRIPTION OF BURN AREA:**

1. Land Use: \_\_\_\_\_

2. Vegetation Cover

a. Primary Vegetation Composition: (Check One)

- |   |   |
|---|---|
| <input type="checkbox"/> Warm Season Grass          | <input type="checkbox"/> Successional Field |
| <input type="checkbox"/> Cool Season Grass          | <input type="checkbox"/> Forest             |
| <input type="checkbox"/> Warm/Cool Season Grass Mix | <input type="checkbox"/> Other _____        |

b. Woody Plants:

<u>Species</u>	<u>Size</u>	<u>Plants/Acre</u>
_____	_____	_____
_____	_____	_____

c. Herbaceous Plants:

<u>Species</u>	<u>Cured</u>	<u>Green</u>
Cool Season Grass	_____	_____
Warm Season Grass	_____	_____
Broad Leaf Plants	_____	_____

3. Slope: \_\_\_\_\_ Aspect: \_\_\_\_\_ Soil Type: \_\_\_\_\_

**B. OBJECTIVE AND TIMING OF BURN:**

- |   |   |
|---|---|
| Control Woody Plants _____ (Full Leaf)  | Improve Wildlife Habitat _____ (1-3" WSG) |
| Stimulate WS Grass _____ (1-3" WSG)     | Remove Litter _____ (1-3" )               |
| Reduce CS Grass _____ (1-3" WSG)        | Stimulate Forbs _____ (Before Forbs Grow) |
| Reduce Wildfire Hazard _____ (1-3" WSG) | Other: _____                              |

**C. SPECIFIED CONDITIONS FOR DAY OF BURN:**

- Air Temperature 50 to 80 F .
- Relative Humidity 25% to 50% .
- Wind - Direction \_\_\_\_\_ Speed 5 to 20 .
- Soil Damp to Touch at Time of Burn.
- Ignition Plan (see burn plan map).
  - Starting Time \_\_\_\_\_ AM or PM (Avoid mid-day burns if possible).
  - Method(s) of Firing \_\_\_\_\_

**D. PREPARATION OF AREA FOR BURNING:**

1. Firebreak Construction: (Show on Burn Plan Map.)

	Width	Length	Date		Width	Length	Date
Plowed	_____	_____	_____	Cool Season Grass	_____	_____	_____
Disked	_____	_____	_____	Burned	_____	_____	_____
Mowed	_____	_____	_____		_____	_____	_____

2. Existing Firebreaks: (Show on Burn Plan Map.)

Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Snag Felling Necessary: Yes \_\_\_\_\_ No \_\_\_\_\_ (Show on Map.)

4. Potential Hazardous Areas: (Show on Map.) (Show Protection Plan.)

Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**E. ADJACENT AREAS:**

Special Precaution Areas (Show on Map):

\_\_\_\_\_  
\_\_\_\_\_

**F. TOOLS/EQUIPMENT NEEDED:** 200 gallon pumper, 50 gallon pumper on Gator, Blowers, Handtools,  
(See Attached List)

\_\_\_\_\_  
\_\_\_\_\_

**G. MANPOWER NEEDS:**

4 Corps crew members

\_\_\_\_\_  
\_\_\_\_\_

**H. SPECIAL PRECAUTIONS TO PREVENT FIRE ESCAPE:** Secure back fire line, check for spot-over,  
constant communications

\_\_\_\_\_  
\_\_\_\_\_

**I. SUPPRESSION PLAN IF FIRE ESCAPES:** 1-2 crew members stay with prescribed burn (stop ignition),  
the remaining members suppress spotover

\_\_\_\_\_  
\_\_\_\_\_

**J. PATROL AND MOP UP PLAN:** Extinguish all hot spots, Secure fireline, Check for spot-overs

\_\_\_\_\_  
\_\_\_\_\_

Prescribed Burn Plan

**K. Pre-Burn Checklist:**

1. Weather forecast \_\_\_\_\_  
 (National Weather Service 660-447-1887)
2. Necessary Firebreaks Constructed \_\_\_\_\_
3. Tools/Equipment/Manpower Ready \_\_\_\_\_
4. Notifications: (The following numbers should be called and informed of planned burning operations and locations. Certain numbers can be excluded depending on burn location).

PHONE NOS.

CONTACT

CONTACTED

UNABLE TO CONTACT

_____	Monroe County Sheriff (660) 327-5175 (Contact Monroe County 911 Dispatch)	_____	_____
_____	Ralls County Sheriff (573) 985-5611	_____	_____
_____	Monroe City Rural Fire Dept (573) 735-4431 (Contact Monroe County 911 Dispatch)	_____	_____
_____	Paris City Fire Department (660) 327-5175 (Contact Monroe County 911 Dispatch)	_____	_____
_____	Perry Rural Fire Association (573) 565-3300	_____	_____
_____	Indian Creek Fee Booth (573) 735-4672	_____	_____
_____	Ray Behrens Fee Booth (573) 565-3408	_____	_____
_____	Indian Creek Marina (573) 735-4075	_____	_____
_____	Blackjack Marina (573) 565-2233	_____	_____
_____	Department of Natural Resources Mark Twain State Park Superintendent Charles Hess ..... (573) 565-3440	_____	_____

Adjacent landowners

(adjacent landowners shall be identified and notified prior to burning).

_____	_____ ( ) _____	_____	_____
_____	_____ ( ) _____	_____	_____
_____	_____ ( ) _____	_____	_____
_____	_____ ( ) _____	_____	_____
_____	_____ ( ) _____	_____	_____

MARK TWAIN LAKE

Prescribed Burn Plan Prepared By:

\_\_\_\_\_  
Park Ranger

\_\_\_\_\_  
Date

Concurrence and Recommended Implementation of the Prescribed Burn Plan:

\_\_\_\_\_  
Natural Resource Program Leader

\_\_\_\_\_  
Date