STATE OF NEW MEXICO

ENERGY, MINERALS AND

NATURAL RESOURCES DEPARTMENT

FORESTRY DIVISION

# 2025 RESOURCE MOBILIZATION GUIDE

MOBILIZATION GUIDE FOR USING NEW MEXICO FIRE DEPARTMENTS ON WILDLAND FIRE INCIDENTS

Photo of City of Santa Fe Type 3 Engine on the 2620 Road Fire on the Olympic Peninsula near Brinnon, Washington 2024 Photo Courtesy of Tom Miller - City of Farmington FD W MEXICO

ORESTRY DIVISIO

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# TABLE OF CONTENTS

#### INTRODUCTION

#### CHAPTER 1: QUALIFICATION SYSTEM FOR PERSONNEL

| INTRODUCTION:  | 7  |
|--|----|
| REFERENCED STANDARDS:  | 7  |
| QUALIFICATION SYSTEM DESCRIPTION:                                    | 7  |
| Prerequisite Experience:   | 7  |
| TRAINING:  |    |
| Physical Fitness:  |    |
| PERSONAL PROTECTIVE EQUIPMENT AND CLOTHING:                          | 8  |
| TRAINEE STATUS:  | 9  |
| COUNTY OR MUNICIPAL CERTIFICATION:                                   | 9  |
| MANAGING THE QUALIFICATION SYSTEM: LOCAL AND STATE RESPONSIBILITIES: |    |
| INCIDENT MANAGEMENT TEAM APPLICATIONS/NOMINATIONS:                   | 10 |
| FITNESS TESTING:   | 11 |
| Training for the Pack Test:  | 11 |
| The Course:  |    |
| Equipment:   | 12 |
| Testing at Altitude:   | 12 |
| Safety/Medical Evacuation Plan:                                      | 12 |
| POSITION DESCRIPTIONS:   |    |
| MAINTAINING QUALIFICATION CURRENCY:                                  | 16 |
| Performance Evaluations:   | 16 |
| EQUIVALENCY COMMITTEE:   | 17 |

#### CHAPTER 2 : STANDARDS FOR RMP INCIDENT MEDICAL RESOURCES

| Introduction:   | 18 |
|---|----|
| Referenced Standards:   |    |
| NM EMS PERSONNEL GUIDANCE: MEDICAL DIRECTION AND PROTOCOLS:   |    |
| RMP FIRE DEPARTMENT MEDICAL PROVIDER PERSONNEL QUALIFICATIONS | 19 |
| Incident Medical Providers: Basic/Intermediate/Paramedic      | 19 |
| NWCG RMP FIRE DEPARTMENT MEDICAL EQUIPMENT STANDARDS          | 20 |
| EMS Units   |    |
| NWCG STANDARDS FOR RAPID EXTRICATION MODULE SUPPORT           | 20 |
| NWCG Standards for Rapid Extraction Module Support            | 21 |
|   |    |

#### **CHAPTER 3: STANDARDS FOR FIRE APPARATUS**

| INTRODUCTION:                       | 22 |
|-------------------------------------|----|
| SAFETY:                             | 22 |
| COMMUNICATIONS PLAN:                | 22 |
| GROSS VEHICLE WEIGHT RATING (GVWR): | 24 |
| APPARATUS TYPES:                    | 24 |
| Engines:                            | 25 |
| Support Tenders:                    |    |
| Hose and Appliance Connections:     |    |
| Equipment:                          |    |
| MANIFEST:                           |    |
| INSPECTIONS:                        |    |
|                                     |    |

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

| DRIVERS OF FIRE APPARATUS:   |    |
|--|----|
| Engine Staffing and Management:  |    |
| Command Vehicles:  |    |
| CHAPTER 4: MOBILIZATION OF RESOURCES                                   |    |
| INTRODUCTION:  | 30 |
| MAINTAINING AND COORDINATING BASIC FIRE PROTECTION COVERAGE:           |    |
| ESTABLISHED ORDERING CHANNELS:   | 30 |
| In-State Fire Assignment RMP Ordering Process                          |    |
| Out of State Fire Assignment RMP Ordering Process                      |    |
| REQUIREMENTS FOR PERSONNEL AND APPARATUS:                              |    |
| In-State Fire Assignments Obligations:                                 |    |
| Out-of-State Fire Assignments Obligations:                             |    |
| Single Resources:  |    |
| RMP Fire Resource Requests:  |    |
| Transition From Initial Attack Response to Extended Attack Response    |    |
| Extended Attack Response   |    |
| Out of State Assignment  |    |
| TRAVEL GUIDELINES:   |    |
| Incident Check-In:   |    |
| While On Assignment:   |    |
| Demobilization:  |    |
| Assignment of RMP Liaison:   |    |
| RMP Liaison Job Description:   |    |
| Assignment of RMP Agency Representatives:                              |    |
| CONTACTING EMNRD - FORESTRY DIVISION AND INTERAGENCY DISPATCH CENTERS: |    |
| RMP MOBILIZATION INITIATED AFTER AN IN-JURISDICTION RESPONSE:          |    |
| RMP MOBILIZATION INITIATED AFTER A MUTUAL AID RESPONSE:                |    |
| CHAPTER 5: ADMINISTRATVE PROCEDURES                                    |    |
| INTRODUCTION:  |    |
| Personnel:   |    |
|  |    |

| Personnel:   | 37 |
|--|----|
| Personnel Reimbursement Rates:                           |    |
| PAY DIFFERENTIALS:                                       |    |
| Personnel Timekeeping:                                   |    |
| TRAVEL REIMBURSEMENT GUIDELINE:                          | 41 |
| Maximum Crew Weight for Aircraft Travel:                 |    |
| REIMBURSEMENT FOR CREW ROTATION:                         | 43 |
| REQUESTING REIMBURSEMENT FOR PERSONNEL:                  | 44 |
| WORKER'S COMPENSATION:                                   | 44 |
| EQUIPMENT:   | 44 |
| EQUIPMENT CHECK-IN:                                      |    |
| EQUIPMENT REIMBURSEMENT RATES:                           | 45 |
| EQUIPMENT TIMEKEEPING:                                   | 49 |
| EQUIPMENT TRAVEL AND TRANSPORT:                          | 51 |
| EQUIPMENT REIMBURSEMENT PROCEDURES:                      | 51 |
| EQUIPMENT/PERSONNEL ACCIDENTS, INJURIES, AND ILLNESSES:  | 52 |
| Local Government Employee Responsibilities:              | 52 |
| Local Government Supervisor Responsibilities:            | 53 |
| Forestry Division Responsibilities:                      |    |
| INCIDENT HOST/INCIDENT MANAGEMENT TEAM RESPONSIBILITIES: |    |
|  |    |

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

| SUPPLY REIMBURSEMENT PROCEDURES:                       | 53 |
|--|----|
| CHAPTER 6: DIRECTORY                                   |    |
| DIRECTORY OF EMNRD, FORESTRY DIVISION DISTRICT OFFICES | 55 |
| CHAMA DISTRICT (NMS-N1S)                               | 55 |
| CIMARRON DISTRICT (NMS-N2S)                            | 55 |
| SOCORRO DISTRICT (NMS-N3S)                             | 55 |
| LAS VEGAS DISTRICT (NMS-N4S)                           | 55 |
| CAPITAN DISTRICT (NMS-N5S)                             |    |
| BERNALILLO DISTRICT (NMS-N6S)                          |    |
| SANTA FE OFFICE (NMS-N9S)                              | 56 |
| DIRECTORY OF NEW MEXICO INTERAGENCY DISPATCH CENTERS   | 56 |
| Albuquerque Interagency Dispatch Center                |    |
| Silver City Interagency Dispatch Center                | 56 |
| Alamogordo Interagency Dispatch Center                 |    |
| Santa Fe Interagency Dispatch Center                   | 56 |
| Taos Interagency Dispatch Center                       |    |
|  |    |

#### **CHAPTER 7: PARTICPATING ENTITIES**

#### APPENDICES

| APPENDIX A: | EMNRD, FORESTRY DIVISION DISTRICTS                            | 94  |
|-------------|---|-----|
| APPENDIX B: | MAP OF NEW MEXICO INTERAGENCY DISPATCH ZONES                  |     |
| APPENDIX C: | NEW MEXICO ELIGIBILITY REQUIREMENTS FOR ENGINE BOSS CROSSWALK |     |
| APPENDIX D: | NORMAL UNIT STOCKING (NUS) EQUIPMENT LIST                     |     |
| APPENDIX E: | ADMINISTRATIVE FORMS  | 101 |
| APPENDIX F: | FIRE DEPT. IMT APPLICATION REQUEST FORM                       | 111 |

#### GLOSSARY

# **INTRODUCTION**

This Resource Mobilization Plan (RMP) is adopted pursuant to Joint Powers Agreements (JPAs) or Memoranda of Agreements (MOAs) between the State of New Mexico, Energy, Minerals and Natural Resources Department (EMNRD), Forestry Division (Forestry Division), and counties and municipalities. Together, the JPA/MOA and this RMP are intended to create a pool of nationally qualified wildland fire resources within the structural fire service of New Mexico so they may be mobilized to assist in the suppression of wildfires and wildland/urban interface fire incidents. Nothing in the RMP or existing JPAs or MOAs shall authorize or be interpreted for the mobilization to any other emergency response except for wildland fire suppression.

This RMP establishes the standards, procedures, and guidelines to be followed when mobilization is necessary. The standards established here are consistent with those to which all state and federal agencies responding to incidents will be held. The Forestry Division recognizes not all county and municipal fire departments wish to participate in the RMP, or able to meet the minimum requirements. Therefore, participation is voluntary.

This RMP has been modified and updated to reflect experience gained in prior fire seasons.

# REIMBURSEMENT

County and municipal RMP fire department wildland fire suppression activity inclusive of personnel and equipment ordered by and performed on behalf of the Forestry Division shall be reimbursed as outlined in this document.

When filing for reimbursement for an RMP assignment, the county or municipal fire department must submit for reimbursement on the approved Forestry Division reimbursement forms within 45 days upon return to their home unit after demobilization.

# CHAPTER 1: QUALIFICATION SYSTEM FOR PERSONNEL

#### Introduction:

This chapter describes the minimum qualification requirements for local fire department personnel being mobilized outside their jurisdiction under the provisions of this RMP. It is <u>not</u> intended to replace locally developed qualification standards for firefighters responding within their own jurisdiction or local mutual aid area.

This chapter also describes the performance-based system used to document firefighter qualifications, delineates local fire department and Forestry Division responsibilities for managing the system, and establishes criteria for certain positions considered key to the function of the RMP.

#### **Referenced Standards:**

It is this RMP's intent to be consistent with established national standards for wildland and structural firefighter qualifications. The wildland fire qualification standards in this RMP are those of the National Wildfire Coordinating Group (NWCG) as described in the publication *PMS 310-1, Wildland and Prescribed Fire Qualification System Guide,* updated version can be found at <u>https://www.nwcg.gov/publications/pms310-1</u>.

The Forestry Division expects all structural fire department personnel mobilized under the RMP for any fireline assignment will have documented training consistent with NFPA 1900 Standards for Aircraft Rescue and Firefighting Vehicles, Automotive Fire Apparatus, Wildland Fire Apparatus, and Automotive Ambulances. Counties and municipalities are responsible for ensuring personnel responding to RMP requests meet qualification standards.

Emergency Medical Services (EMS) personnel mobilized under the RMP will be currently licensed under the provisions of 7.27.2 New Mexico Administrative Code (NMAC), Licensing of Emergency Medical Services Personnel and their scope of practice defined in 7.27.2 NMAC.

#### **Qualification System Description:**

The following is an overview of the process for qualification in any fire position. The process is fully described in the *PMS 310-1*, *Wildland and Prescribed Fire Qualification System Guide, latest version* available at https://www.nwcg.gov/publications/pms310-1.

#### Prerequisite Experience:

Progression from position to position within the qualification system is intended to be a step-by-step process. Each step establishes the skill and experience required as the foundation for the next step. Except for entry level, all positions require prior

qualification in specific lower-level positions. A firefighter shall have appropriate quantity and quality of experience in these prerequisite positions before seeking higher-level qualifications. It is the incident qualification card (red card) issuing county's or municipality's responsibility to judge whether this requirement has been adequately met.

### Training:

"Required training" provides a direct link between training and job performance to provide for responder health and safe operations on wildland fires. Required training cannot be challenged. Listed training for each position consists of "required training" and "other training" that supports the development of knowledge and skills. "Required training" no longer needs to be completed prior to becoming a "trainee" for the position. "Other training" courses provide essential knowledge required to perform the job. The Forestry Division recognizes training acquired through the United States Fire Administration (USFA) Skills Crosswalk.

To be consistent with NWCG direction, the Forestry Division requires an annual Wildland Fire Safety Refresher Training (RT-130) for all red-carded personnel involved with the RMP. This training must be four to eight hours and follow the minimum recommendations found at https://www.nwcg.gov/publications/training-courses/rt-130/wfstar-catalog.

#### **Physical Fitness:**

Each position has a required level of physical fitness appropriate to the demands of the job. Most fireline positions require annual demonstration of fitness at the "arduous" level. The physical fitness levels and testing standards are described later in this chapter, and the process is more fully described in the *PMS 310-1, Wildland and Prescribed Fire Qualification System Guide* available at https://www.nwcg.gov/publications/training-courses/rt-130/wfstar-catalog.

#### Personal Protective Equipment and Clothing:

All personal protective equipment (PPE) will meet or exceed nationally recognized standards. All firefighters must wear flame-resistant clothing on the fireline and when flying in helicopters, and shall not wear clothing, even undergarments, made of synthetic materials, which can burn and melt on the skin. Sleeves must be rolled down to the wrist. Flame-resistant clothing should be cleaned or replaced whenever soiled, especially when soiled with petroleum products. Flame-resistant clothing must be replaced when the fabric is so worn as to reduce the protection capability of the garment or is so faded as to significantly reduce the desired visibility qualities. Yellow long-sleeved aramid shirts are required at all times while on the fireline and for national mobilization. Firefighters shall wear a hard hat and leather gloves while on the fireline. Personnel assigned to wildland fires must wear a minimum of eight-inch-high, laced-

type leather exterior work boots, with Vibram-type, melt-resistant soles, and meet NFPA Wildland Firefighting Standards. The eight-inch height requirement is measured from the bottom of the heel to the top of the boot. Firefighters shall use eye and face protection whenever there is a danger from material being thrown back in their face.

Firefighters shall either comply with host agency requirements regarding fire shelters on fireline suppression assignments or follow their individual agency requirements if they are more restrictive. Firefighters shall use hearing protection when working with high-noise-level firefighting equipment, such as helicopters, air tankers, chain saws, pumps, etc. When operating chain saws, sawyers and swampers shall wear additional safety equipment, including approved chaps, gloves, hard hat, and eye and hearing protection. Swampers should wear chaps when the need is demonstrated by a risk analysis considering proximity of the chain saw to the sawyer, and the slope, fuel type, etc. Face and neck protection (Nomex shrouds) are not required PPE. If issued, shrouds should be deployed only in impending flash fuel or high-radiant heat situations and not routinely worn throughout the operational period, due to an unacceptable increase in physiological heat stress.

# Trainee Status:

Trainees can initiate position task books (PTBs) prior to attendance and successful completion of required training. However, trainees cannot become fully qualified for the position until they have successfully completed the required training. A trainee must be qualified in the prerequisite position(s) before a PTB can be initiated. Trainee status shall be reflected on the red card and allows the trainee to perform in the position under direct supervision of someone who is fully qualified in the position. Their performance may fall into one of two categories, on the job training (OJT) or evaluation. OJT may involve shadowing the experienced person or performance of certain job functions with coaching from the experienced person. When evaluation is being done, the expectation is that the trainee will perform the job without significant assistance from the experienced person and the trainee's performance will be evaluated and documented in the PTB. Other than entry level, all PTBs require fire assignments to complete tasks. A single fire assignment rarely provides sufficient experience as a trainee to become fully qualified. Counties and municipalities are encouraged to judge the quality of assignments before issuing certification of qualification. Once all tasks have been adequately demonstrated, the final evaluator provides a recommendation for certification. No more than two Operations PTBs may be open at the same time.

# **County or Municipal Certification:**

Once all prerequisites have been met and based on a final evaluator's recommendations, the county or municipality may issue proof of qualification in the form of a red card. All RMP personnel must be prepared to show a red card for their position on an incident.

### Managing the Qualification System: Local and State Responsibilities:

Under the provisions of the RMP, county and municipal fire departments will establish, manage, and maintain a qualification system for their own personnel. The Forestry Division expects county and municipal fire departments to certify qualifications and issue red cards for their personnel up to and including the "200 level" (Engine Boss, Incident Commander Type 4, EMS services, etc.). As part of that process, county and municipal fire departments of the following:

- prerequisite experience;
- completion of training;
- annual fitness testing;
- PTB completion;
- county or municipal certification of qualification(s);
- cumulative experience in the position;
- annual refresher (RT-130); and
- annual red card.

The Forestry Division will certify position qualification for all positions at or above the "300 level" (Strike Team Leader and above), or any position for an Incident Management Team assignment/application, and issue red cards. County and municipal fire departments, in consultation with the Forestry Division's local district Fire Management Officer (FMO), may identify candidates, and document training for the higher-level positions. When a candidate has completed all requirements for qualification, the county or municipal fire department shall submit all documentation through the appropriate Forestry Division district office prior to <u>March 1<sup>st</sup></u> of each year for review and certification.

All 300 level and above completed task books received by the appropriate Forestry Division district office will be submitted to and reviewed by the Forestry Division/RMP Cooperator Red Card Committee. The committee is comprised of eight Forestry Division District FMOs, IWC Camp Supervisor, Wildfire Response Program (WRP) Supervisor, Pecos River Crew Superintendent, Mimbres Crew Superintendent, State FMO, State Assistant FMO, and two RMP cooperators identified by the RMP Committee.

# Incident Management Team Applications/Nominations:

County and municipal fire departments shall submit a \*Fire Department Wildland Fire Incident Management Team Application Request Form for an incident management team, Type 3 or above, to the Forestry Division for approval prior to submission of an official Complex Incident Management Team (CIMT) Application to the team. All applications shall be accompanied with all back-up documentation, as well as a letter of support from the local agency administrator (fire chief or equivalent) to support the team nomination. \*Refer to Appendix F Form FD CIMT APPROVAL V.6.22.23.

### Fitness Testing:

RMP cooperators qualified at 300 level and above who are red carded by the Forestry Division will need verification of a pack test by a permanent Forestry Division employee. The Forestry Division will not accept fitness testing conducted by non-Forestry Division employees.

An important part of being a qualified firefighter is maintaining an adequate level of physical fitness to be productive and to maintain an adequate energy reserve to meet unforeseen emergencies. County and municipal fire departments shall administer physical fitness testing annually prior to issuing red cards, up to and including "200" level positions including engine boss, to their personnel. The current NWCG standard for physical fitness testing is a group of work capacity tests referred to as the "Pack Test". More accurately, it is a system of three tests, each intended to be equivalent to a particular level of work demand associated with various job duties. The three levels are arduous, moderate, and light.

Refer to the "Fitness and Work Capacity 2009 Edition" for further details on pack test administration and implementation at <u>https://www.nwcg.gov/publications/307</u>.

| Work<br>category | Test       | Distance | Pack    | Maximum time |
|------------------|------------|----------|---------|--------------|
| Arduous          | Pack Test  | 3 Miles  | 45 lbs. | 45 Minutes   |
| Moderate         | Field Test | 2 Miles  | 25 lbs. | 30 Minutes   |
| Light            | Walk Test  | 1 Mile   | None    | 16 Minutes   |

# Training for the Pack Test:

The Forestry Division encourages firefighters to start training for fitness testing four to six weeks prior to the test for maximum safety and benefit. It is best to start training with little or no weight and establish a pace that will meet the time requirement. Firefighters should gradually increase weight and distance until the test requirements can be consistently met. In the event of a state or national health emergency, firefighters shall follow all state and local guidelines for as long as those guidelines are in effect as they apply to fitness test training. Firefighters should refer to their agency's best practice guidelines for specifics.

# The Course:

The course shall be relatively flat and have a firm-walking surface. Out-and-back courses have the advantage of canceling out the effects of wind and grade. The distance must be accurately measured with a measuring wheel or other proper measuring device to verify course distance.

# Equipment:

- a scale to weigh packs (hanging scale recommended);
- two stopwatches (a primary and a back-up);
- radios and cell phones for monitoring and safety;
- forms for documenting test and for informed consistency of testing; and
- signs, safety vests, or other equipment as required for safety.

# Testing at Altitude:

Candidates performing the work capacity tests at an altitude of 4,000 feet or greater shall be acclimated to the environment. The maximum time allowed to perform the test shall be adjusted according to the following chart:

| Altitude Correction Table: |            |            |            |
|----------------------------|------------|------------|------------|
| Altitude                   | Pack Test  | Field Test | Walk Test  |
| 8,000 – 9,000 feet         | 90 seconds | 60 seconds | 30 seconds |
| 7,000 – 8,000 feet         | 75 seconds | 50 seconds | 25 seconds |
| 6,000 – 7,000 feet         | 60 seconds | 40 seconds | 20 seconds |
| 5,000 – 6,000 feet         | 45 seconds | 30 seconds | 15 seconds |
| 4,000 – 5,000 feet         | 30 seconds | 20 seconds | 10 seconds |

# Safety/Medical Evacuation Plan:

County and municipal fire departments shall develop a Safety/Medical Evacuation Plan for the test, and the test administrator must be familiar with its features. A first responder, EMT, or other person trained to recognize the signs and symptoms of physical distress shall be on site throughout the test.

# Position Descriptions:

The following charts outline the qualification requirements for positions commonly used in RMP mobilizations. All the positions outlined are nationally recognized standard positions. For positions not listed below, refer to the *NWCG Standards for Wildland Fire Position Qualifications, PMS 310-1* available at https://www.nwcg.gov/publications/pms310-1.

The Advanced Firefighter/Squad Boss position is nationally recognized but is based on an organized hand crew background. RMP resources are county and municipal fire departments with engine-based backgrounds. The Forestry Division has adopted the position of Engine Operator as an equivalent to the Squad Boss position. It requires completion of <u>both</u> the Advanced Firefighter (FFT1) and the BLM Engine Operator (ENOP) Position Task Books. The *ENOP Task Book* is available online at https://www.nwcg.gov/agency-taskbook/engine-operator.

The Structure Protection Specialist (STPS) is a nationally recognized position. The STPS provides technical assistance to Incident Management Teams with respect to protection of structures and other improvements.

NWCG has adopted additional National Incident Management System (NIMS) training requirements for wildland fire positions. For specific position training and prerequisites visit <u>https://www.nwcg.gov/positions</u>. Refer to the most recent publication of PMS 310-1 to ensure required NIMS training has been completed for all personnel.

| Firefighter (FFT2)                     |  |
|--|--|
| PREREQUISITE<br>EXPERIENCE             | No prior position qualification  |
| REQUIRED<br>TRAINING<br>OTHER TRAINING | <ul> <li>I-100 Introduction to ICS</li> <li>NIMS: An Introduction IS-700</li> <li>L-180 Human Factors on the Fireline</li> <li>S-130 Firefighter Training</li> <li>S-190 Introduction to Wildland Fire Behavior</li> <li>RT-130 Annual Fireline Safety Refresher (not required for the first year as a Firefighter Type 2 (FFT2); however, it is required for subsequent years)</li> <li>None</li> </ul> |
| PHYSICAL FITNESS                       | Arduous  |
| LEVEL                                  |  |
| Firefighter (FFT1)                     |  |
| PREREQUISITE                           | <ul> <li>Satisfactory performance as a FFT2</li> </ul>   |
| EXPERIENCE                             | <ul> <li>Satisfactory completion of FFT1</li> </ul>  |
| REQUIRED                               | <ul> <li>RT-130 Annual Fireline Safety Refresher</li> </ul>  |
| TRAINING                               | S-131 Firefighter Type 1   |
| OTHER TRAINING                         | <ul> <li>S-211 Pumps and Water</li> <li>S-212 Chainsaw Operator</li> <li>S-219 Firing Operations</li> </ul>  |
| PHYSICAL FITNESS<br>LEVEL              | <ul> <li>Fire Service Driver Training</li> <li>Arduous</li> </ul>  |
| Engine Operator (ENC                   |  |
| PREREQUISITE<br>EXPERIENCE             | <ul> <li>Satisfactory performance as a FFT2</li> <li>Satisfactory completion of FFT1 and ENOP Position<br/>Task Books</li> </ul>   |
| REQUIRED<br>TRAINING                   | <ul> <li>RT-130 Annual Fireline Safety Refresher</li> <li>S-131 Firefighter Type 1</li> </ul>  |

|                    | S-211 Portable Pumps and Water Use                                      |
|--------------------|---|
| OTHER TRAINING     | <ul> <li>L-280 Followership to Leadership</li> </ul>                    |
|                    | S-212 Chainsaw Operator   |
|                    | Fire Service Driver Training  |
|                    | PMS – 419 Engine Operator Training or Local Agency                      |
|                    | Equivalent  |
| PHYSICAL FITNESS   | Arduous   |
| LEVEL              |   |
| Engine Boss (ENGB) |   |
| PREREQUISITE       | <ul> <li>Satisfactory performance as Advanced Firefighter/</li> </ul>   |
| EXPERIENCE         | Engine Operator (ENOP)  |
|                    | <ul> <li>Satisfactory completion of ENGB Position Task Book</li> </ul>  |
| REQUIRED           | RT-130 Annual Fireline Safety Refresher                                 |
| TRAINING           | <ul> <li>ICS-200 ICS for Single Resources and Initial Action</li> </ul> |
|                    | ICS-200 ICS for Single Resources and Initial Action     Incidents       |
|                    | <ul> <li>S-230 Single Resource Boss TrainingS-290</li> </ul>            |
|                    | Intermediate Wildland Fire Behavior                                     |
| OTHER TRAINING     |   |
| OTHER TRAINING     | 5   |
|                    | S-219 Ignition Operations   |
|                    | S-260 Interagency Incident Business Management                          |
|                    | S-270 Basic Air Operations  |
|                    | L-280 Followership to Leadership  |
| PHYSICAL FITNESS   | Arduous   |
| LEVEL              |   |
| Incident Commander |   |
| PREREQUISITE       | Satisfactory performance as a FFT2                                      |
| EXPERIENCE         | <ul> <li>Satisfactory completion of ICT5 Position Task Book</li> </ul>  |
| REQUIRED           | <ul> <li>RT-130 Annual Fireline Safety Refresher</li> </ul>             |
| TRAINING           | <ul> <li>ICS-200 ICS for Single Resources and Initial Action</li> </ul> |
|                    | Incidents   |
|                    | S-131 Firefighter Type 1  |
| OTHER TRAINING     | <ul> <li>S-211 Pumps and Water Use</li> </ul>                           |
|                    | S-212 Chainsaw Operator   |
| PHYSICAL FITNESS   | Arduous   |
| LEVEL              |   |
| Incident Commander | Type 4 (ICT4)   |
| PREREQUISITE       | Satisfactory performance as any Single Resource Boss                    |
| EXPERIENCE         | (ENGB, CRWB, etc.)  |
|                    | Satisfactory completion of ICT4 Position Task Book                      |
| REQUIRED           | RT-130 Annual Fireline Safety Refresher                                 |
| TRAINING           | S-200 Initial Attack Incident Commander                                 |
|                    |   |
| OTHER TRAINING     | S-219 Firing Operations   |

|                               | S-215 Fire Operations in the Urban Interface  |
|-------------------------------|---|
| PHYSICAL FITNESS              | Arduous   |
| Strike Team Leader –          | Engine (STEN)   |
| PREREQUISITE<br>EXPERIENCE    | <ul> <li>Satisfactory performance as any Single Resource Boss<br/>(ENGB, CRWB, etc.)</li> <li>Satisfactory completion of STEN Position Task Book</li> </ul>   |
| REQUIRED<br>TRAINING          | <ul> <li>RT-130 Annual Fireline Safety Refresher</li> <li>ICS 300 Intermediate ICS for Expanding Incidents</li> <li>IS-800 National Response Framework: An Introduction</li> <li>S-215 Fire Operations in the Urban Interface</li> <li>S-330 Task Force/Strike Team Leader</li> </ul> |
| OTHER TRAINING                | L-380 Fireline Leadership   |
| PHYSICAL FITNESS<br>LEVEL     | Moderate  |
| <b>Division/Group Super</b>   | visor (DIVS)  |
| PREREQUISITE<br>EXPERIENCE    | <ul> <li>Satisfactory performance as a TFLD or ICT3 or ICT4<br/>and STEN</li> <li>Satisfactory performance as a DIVS on a wildland fire<br/>incident</li> <li>Satisfactory completion of DIVS Position Task Book</li> </ul>   |
| REQUIRED<br>TRAINING          | <ul> <li>RT-130 Annual Fireline Safety Refresher</li> <li>S-339 Division/Group Supervisor</li> <li>S-390 Introduction to Wildland Fire Behavior<br/>Calculations</li> </ul>   |
| OTHER TRAINING                | L-381 Incident Leadership   |
| PHYSICAL FITNESS<br>LEVEL     | Arduous   |
| <b>Structure Protection S</b> | pecialist (STPS)  |
| PREREQUISITE<br>EXPERIENCE    | Satisfactory performance as a DIVS or ICT3 and STPS   |
| REQUIRED<br>TRAINING          | Annual Fireline Safety Refresher (RT-130)   |
| OTHER TRAINING                | None  |
| PHYSICAL FITNESS<br>LEVEL     | Moderate  |

# Annual Certification:

County and municipal fire department participants in the RMP shall review firefighter qualifications annually and issue red cards on or before April 1<sup>st</sup>.

The county or municipal fire department's Wildland Coordinator or designated RMP contact shall provide the local Forestry Division's district office with copies of 300 level or above red cards before April 1<sup>st</sup>. Refer to Appendix A for Forestry Division district boundaries and Chapter 5 Directory for contact information of the Forestry Division district office servicing your fire department.

#### Maintaining Qualification Currency:

Position qualifications shall remain current for a maximum of five years provided annual fitness and annual refresher requirements are maintained (air operations qualifications and dispatch positions are valid for a maximum of three years).

Currency may be maintained by the following:

- satisfactory performance in the qualified position within the allotted five-year time frame (three years for aircraft related and dispatch positions);
- satisfactory performance in a higher position for which that position is a prerequisite; and
- satisfactory performance in a position that is identified in *PMS-310-1* as "Other position assignments that will maintain currency".

# Performance Evaluations:

Individuals or crews shall receive a performance rating for their work on the incident. These performance ratings shall be submitted to their fire department supervisor and sent to the local Forestry Division district office attached to the reimbursement package and when requesting red card updates.

Personnel who receive a "deficient" rating on an evaluation shall work with their fire department supervisor to create a development plan to correct the deficiency. A development plan shall include:

- a training plan, which requires taking appropriate fire training courses;
- an experience plan, which requires additional task book experiences; and
- a physical fitness plan, which establishes a periodic fitness program to increase strength or stamina.

Once a firefighter completes the development plan approved by the firefighter's fire department supervisor and the county or municipal fire department submits it to the

local Forestry Division district office, the firefighter may be considered for a new assignment.

Personnel who receive a "satisfactory" rating shall have it noted in their qualification record by the county or municipal fire department for purposes of maintaining currency. Performance sheets shall be submitted by the county or municipal fire department supervisor to the local Forestry Division district office for additional recognition.

#### **Equivalency Committee:**

The NWCG recognizes certain knowledge, and skill may be attained through non-NWCG training courses or job experiences. There are eight voting members on the Equivalency Committee (Committee). The Equivalency Committee Chair or designee shall submit all recommendations to the Forestry Division's Resource Protection Bureau Chief and the State Forester for final decision.

The following is the Committee's recommendation for the following NWCG firefighter positions:

**FFT2** – The Committee recommends the individual will have the complete NWCG S-130, S-190, L-180 and I-100, IS-700 (core basic) classes. If the individual has been through the fire academy and has the International Fire Service Accreditation Congress (IFSAC) seal for structural FFT1 which included the core basic classes but did not include IFSAC testing, then a field day will be required to give the individual an NWCG certificate. Once the academy has the IFSAC testing in place, the Forestry Division will accept the IFSAC certificate. If the individual has taken the on-line course or the CD course or the NFA gap course, the Forestry Division will require a field day before an NWCG certificate is issued.

**FFT1 –** The Committee recommends the individual will have the complete NWCG S-131 class and the completed task book for FFT1.

**ENGB –** See the New Mexico Eligibility Requirements for Engine Boss Crosswalk in Appendix D.

Individuals and fire departments must also maintain evaluation records of assignments while participating in the Crosswalk.

Fire department supervisors who wish to have the Committee review individual firefighter's records shall submit their documentation to the local Forestry Division district office prior to <u>January 1<sup>st</sup></u> of each year for review and certification. Documentation submitted needs to be sufficiently detailed to allow a side-by-side comparison for equivalency. Refer to Appendix A for Forestry Division district boundaries and pages 47-48 for contact information of the Forestry Division district office servicing your fire department.

# **CHAPTER 2 : STANDARDS FOR RMP INCIDENT MEDICAL RESOURCES**

#### Introduction:

This chapter identifies minimum requirements for RMP fire department medical resources being mobilized outside the counties, or municipality's jurisdiction as part of the statewide RMP.

Required equipment is considered essential to ensure safe and effective operation in a wildland urban interface fire environment, while optional equipment substantially improves the capability and flexibility of an apparatus. Fire departments planning on out-of-state RMP assignments may also carry the optional equipment on the apparatus.

#### **Referenced Standards:**

Emergency Medical Services (EMS) personnel mobilized under the RMP will be currently licensed under the provisions of 7.27.2 New Mexico Administrative Code (NMAC), Licensing of Emergency Medical Services Personnel and their scope of practice defined in 7.27.2 NMAC.

The NWCG Standards for Rapid Extraction Module Support, PMS 552 outlines the roles, duties, qualifications, and equipment pertinent to Rapid Extraction Module Support (REMS).

NWCG Standards for Interagency Incident Business Management (May 2024 edition). Chapter 20 -page 19 and 22 referenced for Ambulance and Emergency Medical Responder specifications and typing.

#### NM EMS Personnel Guidance: Medical Direction and Protocols:

EMS personnel mobilized (including Medical Unit Leader) under the RMP will function under the license held by their fire department's Medical Director and will be governed by the fire department's medical protocols. As such, they must be currently licensed and in good standing with their service. A written authorization by the fire department's Medical Director must be submitted to their respective Forestry Division district office and the State Fire Management Officer. Further, the fire department's Medical Director's written authorization shall allow the EMS personnel to perform their full duties in the position while on out of state assignments.

Each EMS Unit member must have a direct employment relationship with their county or municipality and have the specified written authorization from the Medical Director on file with the Forestry Division. The Forestry Division will only be able to reimburse the county or municipality for services provided by county or municipal employees where they remain covered under their Medical Director's Protocols. EMS Providers with a current EMS license in the state of New Mexico are able to provide patient care under their affiliated agency EMS guidelines provided by their current medical director. This includes any special skills that they have been trained and approved to provide by their medical director and their respective agency.

| Incident Medical Providers: Basic/Intermediate/Paramedic |   |  |  |  |
|--|---|--|--|--|
| PREREQUISITE<br>TRAINING                                 | <ul> <li>New Mexico Department of Health licensure as EMT-B,<br/>EMT-I, or EMT-P</li> <li>Satisfactory performance as a FFT2 or higher operations<br/>position</li> </ul>   |  |  |  |
| REQUIRED TRAINING  | <ul> <li>RT-130 Annual Fireline Safety Refresher</li> <li>Current NMDOH license (must be issued by the home-state EMS licensing authority)</li> <li>Introduction to ICS (I-100)</li> <li>NIMS: An Introduction (IS-700)</li> <li>Basic Wildland Firefighter Training (S-130, S190, L-180)</li> </ul>  |  |  |  |
| OTHER TRAINING   | <ul> <li>S-290 Intermediate Wildland Fire Behavior</li> <li>S-270 Basic Air Operations</li> <li>S-271 Helicopter Crewmember</li> <li>Advanced Cardiac Life Support – Provider level dependent.</li> </ul>   |  |  |  |
| PHYSICAL FITNESS<br>LEVEL                                | <ul> <li>See below for medical response personnel typing.</li> </ul>  |  |  |  |
| DESCRIPTION  | <ul> <li>Appropriate medical kit and transportation.</li> <li>May be ordered as a single resource or a 2-person medical team.</li> </ul>  |  |  |  |
| TYPING   | <ul> <li>EMTB – Non-Fire Line Qualified. No physical fitness required.</li> <li>EMTF –(Basic) Fire Line Qualified. Arduous Physical Fitness Required.</li> <li>AEMT – EMT Intermediate. Non-Fire Line Qualified. No physical fitness level required.</li> <li>AEMF – EMT Intermediate. Fire Line Qualified. Arduous Physical Fitness Required.</li> <li>EMTP- Paramedic. Non-Fire Line Qualified. No physical fitness level required.</li> <li>EMTP- Paramedic. Non-Fire Line Qualified. No physical fitness level required.</li> <li>EMPF- Paramedic. Fire Line Qualified. Arduous Physical Fitness Required.</li> </ul> |  |  |  |

# RMP FIRE DEPARTMENT MEDICAL PROVIDER PERSONNEL QUALIFICATIONS

2025

### NWCG RMP FIRE DEPARTMENT MEDICAL EQUIPMENT STANDARDS

#### EMS Units

EMS Units, when mobilized under the RMP shall comply with 18.3.14 NMAC. EMS Units are intended to provide for the medical needs of incident personnel and will typically be assigned to the medical unit in the Logistics Section. Often, they will be ordered with a double crew to provide 24-hour coverage. Crew members shall meet the requirements for EMS personnel outlined in this chapter. REMS personnel shall meet the standards in PMS 552.

|           | Equipment Specifications and Typing:  | # of                      | 24    |
|-----------|---|---------------------------|-------|
|           | AMBULANCE   | Operators<br>Single Shift | hours |
| TYPE<br>1 | Type 1 – Advanced Life Support; Minimum 2 staff<br>(paramedic and EMT); Transport 2 litter patients;<br>Training and equipment meets or exceeds standards<br>as addressed by EPA, OSHA and NFPA 471,472,473<br>and 29 CFR 1910, 120 ETA 3-11 to work in HazMat<br>Level B and specific threat conditions; All immunized<br>in accordance with Centers for Disease Control and<br>Prevention (CDC) core adult immunizations and<br>specific threat as appropriate. | 2                         | 4     |
| TYPE<br>2 | Type 2 – Advanced Life Support; Minimum 2 staff<br>(paramedic and EMT); Transport 2 litter patients, non-<br>HazMat response  | 2                         | 4     |
| TYPE<br>3 | Type 3 – Basic Life Support; Minimum 2 staff (EMT<br>and first responder); Transport 2 litter patients;<br>Training and equipment meets or exceeds standards<br>as addressed by EPA, OSHA and NFPA 471,472,473<br>and 29 CFR 1910, 120 ETA 3-11 to work in HazMat<br>Level B and specific threat conditions; All immunized<br>in accordance with CDC core adult immunizations and<br>specific threat as appropriate.  | 2                         | 4     |
| TYPE<br>4 | Type 4 – Basic Life Support operations; Minimum 2<br>staff (EMT and first responder); Transport 2 litter<br>patients.   | 2                         | 4     |

Reference: NWCG Standards for Interagency Incident Business Management 20-18

#### NWCG Standards for Rapid Extrication Module Support

From PMS – 552: This national document was developed to provide a clear description of the roles, duties, qualifications, and equipment pertinent to the position of the Rapid Extraction Module Support (REMS). The REMS team is a pre-staged rescue team assigned to a wildland fire to provide firefighters a safe, effective, and efficient method of egress off the fireline in the event of injury or illness incurred during firefighting operations.

Wildland firefighting is an inherently dangerous profession. While safety is the primary concern during all operations, unintended incidents do occur which result in injury or illness to wildland firefighters. It is the intent of the REMS team to provide firefighters, who are unable to egress

2025

under their own power, safe, and secure transport off the fireline while simultaneously receiving the appropriate medical care.

While REMS does not intend to replace ground or air transport, ideal conditions may not exist due to a number of circumstances such as heavy smoke inversion, no roads, or equipment malfunctions. The REMS team provides incident managers with another option to reach incapacitated firefighters, with fully equipped resources, prepared to package, and transport injured, or ill personnel off the fireline to the appropriate medical care unit. While this national document recommends minimum staffing levels of the REMS team, it is not intended to exclude the potential need to augment staffing levels based on the complexity of the rescue.

This national document contains information relative to the Incident Command System (ICS) component of the National Incident Management System (NIMS). When ordered, the REMS team will arrive with all the required certifications, authorizations, and equipment identified in the Minimum Equipment List (MEL) REF: PMS 552.

| NWCG Standards for Rapid Extraction Module Support  |  |   |  |  |  |  |
|---|--|---|--|--|--|--|
| NWCG REMS Typing Model  |  |   |  |  |  |  |
| TYPE I  | TYPE II  | TYPE III (SUPPORT)  |  |  |  |  |
| 4 Personnel   | 4 Personnel  | 2 Personnel   |  |  |  |  |
| 1-2, 4x4 Vehicle(s)   | 1-2, 4x4 Vehicle(s)  | 1, 4x4 Vehicle  |  |  |  |  |
| REMS Cache  | REMS Cache   | REMS Cache  |  |  |  |  |
| Advanced Life Support (ALS) Cache   | ALS or Basic Life<br>Support (BLS) Cache   | ALS or BLS Cache  |  |  |  |  |
| 1 Paramedic and 1 EMT (not to be used as EMPF/EMTF)   | 2 EMTs (BLS not to<br>be used as EMTF),<br>ALS provider<br>acceptable but not<br>required  | 1 Paramedic or 1 EMT<br>Reach and Treat only, no<br>technical rescue technician<br>patient extraction expectation             |  |  |  |  |
| UTV required with trailer and patient<br>transport capable<br>* UTV operators must have<br>applicable UTV operator certification<br>per authority<br>having jurisdiction. | UTV recommended<br>with trailer and patient<br>transport capable<br>* UTV operators must<br>have applicable UTV<br>operator certification<br>per authority<br>having jurisdiction. | UTV recommended<br>* UTV operators must have<br>applicable UTV operator<br>certification per authority<br>having jurisdiction |  |  |  |  |

All REMS team members shall be qualified technical specialists.

Reference PMS 552 NWCG Standards for Rapid Extraction Module Support (June 2024) for details.

# CHAPTER 3: STANDARDS FOR FIRE APPARATUS

#### Introduction:

This chapter identifies minimum requirements for fire apparatus being mobilized outside the county's or municipality's jurisdiction as part of the statewide RMP.

Required equipment is considered essential to assure safe and effective operation in a wildland urban interface fire environment, while optional equipment substantially improves the capability and flexibility of an apparatus. Fire departments planning on out-of-state RMP assignments shall also carry the optional equipment on the apparatus.

#### Safety:

All apparatus will conform to federal and state motor vehicle safety standards in effect at the time of apparatus purchase. In addition, all apparatus is required to meet the following:

- enclosed seating with seatbelts for all personnel;
- a functional backup alarm;
- a first aid kit;
- a fire extinguisher;
- U.S. Department of Transportation emergency reflectors;
- rearview mirrors on both sides of the apparatus;
- functional headlights, taillights, marker lights, and turn signals;
- functional windshield wipers; and
- no loose equipment in crew seating areas.

#### Communications Plan:

Fire incidents that involve an RMP mobilization will often be rapidly developing and dynamic. It is critical for safety and effective operations that county or municipal resources can communicate with each other, the incident, the involved dispatch center, and other resources while traveling to and arriving on the incident. For that reason, the New Mexico state fire frequency (154.310 MHz) is designated as the standard travel and initial tactical frequency. All apparatus is required to have functional P-25 compliant, VHF two-way radios that include this frequency. In addition, it is strongly recommended all apparatus have radios programmed to the following New Mexico Initial Action Communications Plan.

| Channel | Function                              | *Frequency   | Assignment & Remarks   |
|---------|---------------------------------------|--|--|
| 1       | State Fire                            | 154.310  | Travel & Initial Tactical  |
| 2       | Forestry Division<br>District Offices | 159.420 tx tone 156.7<br>Las Vegas District uses<br>159.330 tx tone 156.7  | Contact for local Forestry<br>Division district offices  |
| 3       | Forestry Division<br>TAC              | 159.225  | Unit to unit travel and logistics  |
| 4       | Albuquerque<br>Dispatch               | 170.525  | Interagency Dispatch<br>Contact  |
| 5       | Gila/Las Cruces Dispatch<br>(North)   | 169.975  | Interagency Dispatch<br>Contact  |
| 6       | Gila/Las Cruces<br>Dispatch (South)   | RX 169.17500 TX167.97500   | Interagency Dispatch<br>Contact ZONE SOUTH   |
| 7       | Taos Dispatch                         | RX/TX 170.5000 tone 103.5  | Interagency Dispatch<br>Contact  |
| 8       | Alamogordo Dispatch<br>Office         | 172.30000  | Interagency Dispatch<br>Contact  |
| 9       | Santa Fe Zone                         | 172.300  | Interagency Dispatch<br>Contact  |
| 10      | R3 Tac 1                              | 167.5500   | REGION 3 TACTICAL 1  |
| 11      | R3 Tac 2                              | 168.6750   | REGION 3 TACTICAL 2  |
| 12      | R3 Tac 3                              | 168.7750   | REGION 3 TACTICAL 3  |
| 13      | ICS TRAVEL                            | 168.3500   | ICS TRAVEL/TAC   |
| 14      | Air-to-Ground (AG)                    | <ol> <li>A/G 51 168.3125 PRI</li> <li>A/G 53 168.4875 PRI</li> <li>A/G 56 168.6625 PRI</li> <li>A/G 25 168.7500 PRI</li> <li>A/G 89 167.7000 PRI<br/>Tone 110.9 TX/RX PRI</li> </ol> | <ol> <li>SANTA FE DISPATCH<br/>A/G 62169.3625<br/>SECONDARY</li> <li>ALBUQUERQUE<br/>DISPATCH A/G18 168.0125<br/>SEC</li> <li>TAOS DISPATCH A/G<br/>56 169.1250 SEC</li> <li>ALAMOGORDO<br/>DISPATCH A/G<br/>56 168.6625 SEC</li> <li>SILVER CITY<br/>DISPATCHA/G 62<br/>169.3625</li> </ol> |
| 15      | Air Guard<br>(Guard One)              | 168.625<br>tx tone 110.9   | Emergency use or initial<br>contact to incident aircraft<br>only (note 2)  |

NOTES: All federal frequencies were converted to Narrow Band FM (12.5 KHz). \*Frequencies are changed often, and every attempt has been made to ensure these are correct.

- 1. These air-to-ground frequencies are valid only within the zone assigned. Channels 13, 14, and 15 are available for preprogramming in the primary zones you may be working in.
- 2. Air guard (Guard One) is an emergency channel monitored by all NWCG qualified aircraft and must be programmed into all wildfire radios. It is customary to program it into the last channel of the radio or group. National radio cache radios will have it programmed into channels 14 and 16 in all groups.
- 3. There are several VHF inoperability channels that the U.S. Department of Homeland Security, Office of Emergency Communications has made available for emergency incidents. If those frequencies are being used by the incident, they will be provided to responding personnel at the incident.

# Gross Vehicle Weight Rating (GVWR):

All apparatus is required to be within the limits of manufacturer's GVWR when fully loaded, including personnel, water, equipment, and fuel. The Forestry Division recommends any apparatus operating off road or on unimproved roads restrict total weight to 85% of manufacturer's GVWR or less. <u>Rough Road Factor (RRF)</u>: A RRF reduces the payload due to the dynamic loads imposed on the vehicle from road conditions. Smooth surfaces have an RRF of 1.0, while rough or unsurfaced roads have an RRF of 0.9. Extreme conditions may require adjustment even lower.

Refer to United States Forest Service (USFS) FSH 7109.19 – Fleet Equipment Management Handbook – Chapter 30 – Use, Loading and Storage – for Rough Road Factor Calculations.

#### Apparatus Types:

All apparatus ordered for mobilization shall conform to NWCG Standards for Resource Typing as specified in *https://www.nwcg.gov/publications/pms200*. These standards establish <u>minimum</u> criteria for pump and tank capacity, equipment, and staffing. The standards are not intended to restrict agencies from exceeding the minimum specifications.

| Туре | Pump<br>(gpm) | Tank<br>(gallons) | 2½"<br>Hose | 1½"<br>Hose | 1"<br>Hose | Ladders     | Minimum<br>Staffing |
|------|---------------|-------------------|-------------|-------------|------------|-------------|---------------------|
| 1    | 1,000 gpm     | 300 gals.         | *1,200 ft.  | 500 ft.     |            | 20 ft. ext. | 4 #                 |
| 2    | 500 gpm       | 300 gals.         | *1,000 ft.  | 500 ft.     |            | 20 ft. ext. | 3                   |
| 3    | 150 gpm       | 500 gals.         |             | 1,000 ft.   | 500 ft.    |             | 3                   |
| 4    | 50 gpm        | 750 gals.         |             | 300 ft.     | 300 ft.    |             | 2                   |
| 5    | 50 gpm        | 400 gals.         |             | 300 ft.     | 300 ft.    |             | 2                   |
| 6    | 50 gpm        | 150 gals.         |             | 300 ft.     | 300 ft.    |             | 2                   |
| 7    | 10 gpm        | 50 gals.          |             |             | 200 ft.    |             | 2                   |

### **Engines:**

\* 21/2" hose or larger

# Three personnel are acceptable on older model cabs that cannot accommodate four.

Type 1 and Type 2 Engines are structural engines and will be expected to meet all requirements for *NFPA 1900*. Personnel responding on Type 1 or Type 2 Engines shall be *NFPA 1001* qualified and equipped with Structural PPE and Self-Contained Breathing Apparatus (SCBA). These engines typically have high volume pumping capacity and are equipped with master stream appliances but lack pump and roll capability or significant off-road capability.

Type 3, Type 4, Type 5, Type 6, and Type 7 Engines are wildland engines and are intended to operate off-road and will be expected to meet all requirements for *NFPA 1906*. It is recommended they have a minimum axle clearance of 7", a minimum ground clearance of 12", and approach/departure angles of 20 degrees.

# Support Tenders:

| Туре | Pump    | Tank          | Dump Valve  | Drop Tank(s)  | Staffing |
|------|---------|---------------|-------------|---------------|----------|
| S1   | 300 gpm | 4,000 gallons | 10" minimum | 2,500 gallons | 1        |
|      |         | minimum       |             |               |          |
| S2   | 200 gpm | 2,500 gallons | 10" minimum | 2,500 gallons | 1        |
|      |         | minimum       |             |               |          |
| S3   | 200 gpm | 1,000 gallons | 10" minimum | 1,000 gallons | 1        |
|      |         | minimum       |             | _             |          |

| Туре | Pump    | Tank          | Dump Valve  | Drop Tank(s)  | Staffing |
|------|---------|---------------|-------------|---------------|----------|
| T1   | 250 gpm | 2,000 gallons | 10" minimum | 1,000 gallons | 2        |
|      |         | minimum       |             |               |          |
| T2   | 250 gpm | 1,000 gallons | 10" minimum | 1,000 gallons | 2        |
|      |         | minimum       |             | _             |          |

1. Support Water Tenders are intended as water hauling apparatus that fill from a pressure or gravity source, dump into drop tanks, and return to the source for

another load. They are required to carry drop tanks of adequate capacity to offload their entire water load.

- 2. All water tenders and wildland engines 3 through 6 shall be able to prime and pump water from a 10-foot lift.
- 3. Type 3 engines and tactical water tenders shall be equipped with a foam proportioner system.
- 4. Water Tender Staffing Standards:

**Tactical** water tenders will carry a minimum crew of two minimally staffed with an engine boss and FFT2. Tactical tender operators are required, at a minimum, to be qualified current as ENGB and maintain a CDL with tank endorsement or a New Mexico Class E license (or per fire department standards).

**Support** water tenders may be staffed with a crew of one driver/operator when they are used in a support role as a fire engine refill unit or for dust abatement. These operators will pass the Moderate Work Capacity Test, have minimum of S130/S190/L180, ICS100, NIMS IS 700, and maintain a CDL with tank endorsement or a New Mexico Class E license (or per fire department standards).

#### Hose and Appliance Connections:

|                      | Quantity<br>Required | Equipment Description  | NFES #    |
|----------------------|----------------------|--|-----------|
|                      | 20 ft.               | Suction draft hose   |           |
| Hose                 | 300 ft.              | 1 <sup>1</sup> / <sub>2</sub> " Single or double jacket hose NH                      | 1239      |
| 1036                 | 300 ft.              | 1" Single jacket hose (not hard rubber reel line) NPSH                               | 1238      |
| Valve                | 1                    | Suction strainer or strainer/foot valve  |           |
| Nezzlee              | 2                    | 1 <sup>1</sup> / <sub>2</sub> " Nozzles NH, adjustable or foam                       | 0137/0628 |
| Nozzles              | 2                    | 1" Nozzles NPSH, forester or adjustable  | 0024/0138 |
|                      | 1                    | 1" NPSH-F to 1" NH-M adapter   | 0003      |
|                      | 1                    | 1" NH-F to 1" NPSH-M adapter   | 0004      |
| Adapters<br>Reducer/ | 2                    | 1 <sup>1</sup> / <sub>2</sub> " NH-F to1" NPSH-M reducer                             | 0010      |
| Increaser            | 1                    | 2" NPSH-F to 1 <sup>1</sup> / <sub>2</sub> " NH-M reducer                            | 0417      |
| Increaser            | 1                    | 2 <sup>1</sup> / <sub>2</sub> " NH-F to 1 <sup>1</sup> / <sub>2</sub> " NH-M reducer | 2230      |
|                      | 1                    | 1" NPSH-F to 1 <sup>1</sup> / <sub>2</sub> " NH-M increaser                          | 0416      |
| Coupling             | 1                    | 1 <sup>1</sup> / <sub>2</sub> " NH double female                                     | 0857      |

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

|                  | Quantity<br>Required | Equipment Description  | NFES # |
|------------------|----------------------|--|--------|
|                  | 1                    | 1½" NH double male   | 0856   |
| Wye              | 1                    | 1 <sup>1</sup> / <sub>2</sub> " NH-F x 1 <sup>1</sup> / <sub>2</sub> " NH-M x 1 <sup>1</sup> / <sub>2</sub> " NH-M gated wye |        |
|                  | 1                    | Hydrant wrench   | 0688   |
| Wrench           | 2                    | Standard spanner wrenches with gas shut-off slots  |        |
| E: T 1           | 2                    | Pulaskis   | 0146   |
| Fire Tools       | 2                    | McLeods  | 0296   |
| & Equip          | 2                    | Spade shovels  | 0171   |
|                  | 1                    | Portable hand light/flashlight   |        |
|                  | 1                    | Signal mirror  |        |
| General          | 1                    | Bolt cutters (18" minimum)   |        |
| Supplies         | *                    | Drinking water (1 gallon per crew member minimum)  |        |
|                  | 1                    | Battery powered strobe light   |        |
| Radio            | 1                    | Field programmable radio per Unit  |        |
| Personal<br>Gear | *                    | Personal provisions (red pack) for each crew member  |        |
| Engine           | 1                    | Belt weather kit   |        |

There are a wide variety of threaded fitting patterns and connector types in use by various structural and wildland agencies. To facilitate interagency operations and the ability of one apparatus to make physical connections with another, the Forestry Division recommends all apparatus conform to the following standards for threaded connections:

| Hose Diameter                            | Connector Type |
|--|----------------|
| Large Diameter Hose (LDH) 4" or 5"       | Storz          |
| 1½ - 3" Hose                             | NH             |
| 1" Hose                                  | NPSH           |
| <sup>3</sup> ⁄ <sub>4</sub> " or Smaller | GHT            |

Hose Thread Terminology:

- *Storz:* A lugged, quarter turn, non-gender specific connector commonly used in LDH.
- *NH:* National Hose, also commonly referred to as National Standard Thread (NST) and National Hose Thread (HST).
- *NPSH:* National Pipe Straight Hose, a non-tapered pipe thread, also called Straight Iron Pipe Thread (SIPT).
- GHT: Garden Hose Thread.

### Equipment:

The following list of required equipment is intended to assure various apparatus being mobilized under the RMP can work effectively together.

# Apparatus mobilized within New Mexico is required to have the following equipment:

\*Dependent on number of crew members

The Normal Unit Stocking (NUS) equipment list is the standard for federal and state firefighting equipment and is the optional list for RMP apparatus operating within New Mexico. The Forestry Division recommends county and municipal fire departments follow the NUS equipment list for RMP apparatus taking assignments outside of New Mexico. The NUS equipment list can be found in Appendix D.

#### Manifest:

All apparatus shall carry several copies of a manifest listing all on-board equipment and supplies. The manifest will establish the normal complement of tools, equipment, and supplies for that specific apparatus. The county or municipal fire department in charge of the apparatus and the Ground Support Unit Leader or designee at the incident shall reference the manifest at time of check-in and demobilization.

#### Inspections:

The county or municipal fire department or the Forestry Division shall inspect all apparatus mobilized under the RMP before leaving for an incident, during daily inspections, or at check-in depending on type, size, and location of the incident. The Ground Support Unit Leader or designee shall inspect all apparatus at demobilization and reference the manifest.

#### **Drivers of Fire Apparatus:**

All drivers of fire apparatus mobilized under the RMP must hold the appropriate driver's license for the apparatus they will be driving. They must also be designated by their own county or municipality as an "approved driver."

County or municipal designation as an "approved driver" certifies the driver has had appropriate training and orientation in the operation of the specific vehicle, and the county or municipality assumes responsibility for the individual's competent performance.

#### Engine Staffing and Management:

All crew members of apparatus mobilized under the RMP will be qualified as required in Chapter 1, *Personnel Qualifications*, of this RMP. Crew configuration will be made up as follows:

| Crew Size | Engine Boss | Engine Operator | Firefighter    |
|-----------|-------------|-----------------|----------------|
|           | (ENGB)      | (ENOP)          | (FFT1 or FFT2) |
| 4         | 1           | 1               | 2              |
| 3         | 1           |                 | 2              |
| 2         | 1           |                 | 1              |

Under the RMP, apparatus can be mobilized from multiple county or municipal fire departments to form a *Strike Team* or *Task Force*. The definition of these terms can be found in the Glossary.

#### **Command Vehicles:**

All vehicles mobilized under this RMP as "Command Vehicles" and used for the purpose of fireline transportation of Strike Team/Task Force Leaders or other overhead staff must be listed on the State of New Mexico RMP Cooperator Rate Sheet. All command vehicles are required to check in at the incident and have a resource order and an "E" number assigned to them to be eligible for reimbursement. All command vehicles shall meet the following requirements:

- four-wheel drive;
- seating for three people;
- mobile radio;
- emergency lighting;
- first aid kit;
- fire extinguisher; and
- shovel, combi-tool, or other fire tool.

# CHAPTER 4: MOBILIZATION OF RESOURCES

#### Introduction:

This chapter identifies certain procedures to be followed in the mobilization of county or municipal fire department resources under the statewide RMP. Mobilization involves the assembling of requested and qualified resources, their departure from their jurisdiction, and their arrival at an incident. Where not specifically set out in this RMP, county or municipal fire departments shall follow procedures identified in the *Southwest Area (SWA) Mobilization Guide*. The SWA Mobilization Guide is available at https://gacc.nifc.gov/swcc/dispatch\_logistics/dispatch/mobguide/mobguide.htm.

#### Maintaining and Coordinating Basic Fire Protection Coverage:

This RMP recognizes the need for counties and municipalities to provide for continued fire protection services within their jurisdictional boundaries. Counties and municipalities will appoint a contact person or persons knowledgeable in the responsibility of the fire service under applicable state and local laws, standards, and policies, and who will be responsible for the mobilization of county and municipal resources in a manner that ensures adequate local fire suppression capability is maintained. The county or municipal RMP Coordinator must approve all resources mobilized under this RMP and shall work closely with the Forestry Division for mobilization of resources.

# Established Ordering Channels:

# Under this RMP, county and municipal department personnel and equipment are considered state ordered resources.

# In-State Fire Assignment RMP Ordering Process

Forestry Division district office must make requests for county or municipal department resources. Requests must be documented by a resource order generated through the Forestry Division.

# **Out of State Fire Assignment RMP Ordering Process**

All out of state requests for wildland fire suppression assistance through the RMP must be made through the Forestry Division district office to the Resource Protection Bureau with approval from the State Forester. **No resource shall be sent out of state without prior notification to the Resource Protection Bureau Chief and approval from the State Forester.** No resource shall proceed without a resource order from the Forestry Division district office. The following information is needed to process a resource order for all in state and out of state assignments:

- personnel and NWCG qualification on the equipment;
- equipment call sign, type, year, make, model, license, plate number, and vehicle identification number;
- cellular telephone numbers of personnel on the equipment;
- departure time and estimated time of arrival at the incident; and
- travel route if travel to incident will take more than one day.

When resources available through this RMP are needed on an incident, the incident will place an order with the appropriate interagency dispatch center. The center will contact its local Forestry Division district office, which in turn will contact the appropriate RMP coordinator(s) to assemble the requested resources. The Forestry Division district office may involve more than one county or municipal fire department or additional Forestry Division district offices to fill an order. Refer to Appendix A for Forestry Division district boundaries and pages 47-48 for contact information of the Forestry Division district office servicing your fire department.

Additional equipment used to carry equipment or personnel not authorized by the Forestry Division will not be reimbursed. If approved the additional equipment must have a resource order. Any accidents or injuries involving unapproved equipment are the sole responsibility of the county or municipality that owns the equipment.

# **Requirements for Personnel and Apparatus:**

All personnel who are part of the RMP are responsible for verifying that prior notification to the Resource Protection Bureau Chief and approval from the State Forester is completed before **mobilizing** for Interagency Incident Management team assignments out-of-state. If prior authorization is not coordinated and received, Forestry Division will not be able to reimburse the resource.

All fire apparatus and personnel must meet the requirements of the resource order and the standards established in other chapters of this RMP. Personnel who and equipment that may be called upon to fight structural fires will adhere to all laws and rules or regulations applicable to structural firefighting within New Mexico.

# In-State Fire Assignments Obligations:

The sending county or municipal fire department, by accepting the mobilization assignment, is committing the resource to be available to the requesting agency for 14 days. Once committed, they are considered a resource of the requesting agency. Negotiations may take place with the county or municipal fire department for a reduced or extended assignment. Rotation of personnel if needed, will be at the discretion of the county or municipal fire department or the incident.

# **Out-of-State Fire Assignments Obligations:**

The sending county or municipal fire department, by accepting the mobilization assignment, is committing the resource to be available to the requesting agency for 14 days, **<u>not including</u>** travel to and from the incident. Once committed, they are considered a resource of the requesting agency. Negotiations may take place with the sending county or municipal fire department for a reduced or extended assignment. Rotation of personnel if needed, will be at the discretion of the sending county or municipal fire department.

# Single Resources:

Generally, single resource positions are those at Strike Team Leader and above. This RMP allows single resources to be dispatched through the RMP; provided the Forestry Division has red carded the individual as qualified or trainee for the position. It will be the county's or municipality's responsibility to ensure those with EMS units or line EMTs are carded and licensed under the New Mexico Registry of Emergency Services Personnel.

#### **RMP Fire Resource Requests:**

# **Transition From Initial Attack Response to Extended Attack Response**

Initial attack response is the first action taken to suppress wildland fire. This is normally the first operational period. During initial attack, the RMP is not used and Forestry Division uses local resources. When rapidly transitioning from initial attack to extended attack (the first operational period for extended attack) the Forestry Division will use the closest resources available and not the RMP rotation sequence.

# **Extended Attack Response**

Except as provided above, the Division district office will place resource order requests within the RMP rotation sequence. RMP resources on the rotation that do not meet the "Date and Time Needed," or do not respond after a reasonable amount of time will be offered a future assignment opportunity in the established rotation based on the cooperator's availability status.

# **Out of State Assignment**

All Forestry Division RMP resources will be on a statewide rotation by Forestry Division district office utilizing the district's extended attack rotation sequence to provide requested resources in an equitable process based on the respective district's RMP capacity. RMP resources must meet the Date and Time Needed. If the county or municipality cannot fill the request it will be offered a future assignment opportunity in

the established rotation based on the cooperator's availability status. This will allow the Forestry Division to provide equal opportunity for all county/municipalities to participate in out-of-state assignments.

When a resource request is placed directly to the Forestry Division for several resources e.g., Strike Team orders, the Resource Protection Bureau will provide equal opportunity to Forestry Division district offices to provide the requested resources. Forestry Division district offices will use their extended attack rotation sequence to provide requested resources.

# Resources will abide by rules and regulations set forth by the host agency in which the resource is assigned to.

# Travel Guidelines:

- All apparatus mobilized under the RMP will be inspected before leaving for an incident, ensure daily checks while in route to the incident and at check-in depending on type, size, and location of the incident.
- resources on travel status shall update their respective New Mexico Forestry Division district office and the ordering Interagency Dispatch Center. Updates shall include status of travel to and from the incident, if deviation to a travel itinerary is needed, emergency demob travel, and reassignments.
- no driver shall drive more than 10 hours (behind the wheel) within any duty day. Multiple drivers in a single vehicle may drive up to the duty day limitation provided no driver exceeds the individual driving limitation of 10 hours. Drivers shall drive only if they have had at least eight consecutive hours off duty before beginning shift. No travel will take place after 10 p.m. or before 5 a.m.
- when resources are ordered and assembled as a Strike Team or Task Force, they will meet at a designated location and travel together as a unit under the supervision of the Strike Team/Task Force Leader. Resources ordered as single resources may be assembled as a Strike Team/Task Force at the incident; and
- counties or municipalities supplying resources to an incident shall make provisions to cover expenses for travel, including gas, oil, maintenance, food, and lodging. The Forestry Division recommends that a county or municipal credit card be assigned to the resource for this purpose. Expenditures of this nature may be reimbursable as described in Chapter 5: ADMINISTRATIVE PROCEDURES.

# Incident Check-In:

All personnel and equipment must check-in at the Incident Command Post (ICP) with the Incident Commander or the appropriate sections (Plans, Finance, Logistics) before they are given an incident assignment. Resources will be required to have a resource order, their red card, and the appropriate cooperator rate sheet for check-in. Personnel and equipment that have not completed check-in are not eligible for reimbursement. If any issues occur, the RMP resource shall confirm whether a Forestry Division/RMP representative is present to aid resources through the check in process, particularly in the Finance Section.

# While On Assignment:

If your equipment is moved to a new incident, YOU MUST CALL THE LOCAL FORESTRY DIVISION DISTRICT OFFICE OR SANTA FE OFFICE. The Forestry Division needs a copy of the new resource order or the name of the new incident and the incident number, so it can obtain a resource order.

Equipment Shift Tickets for the equipment must be the same as the Crew Time Report for the personnel. If ALL personnel take a break for a meal at the same time, then that break must be shown on the Equipment Shift Ticket. If the equipment is not in service due to tire repair, breakdown, etc. then the personnel are not on the clock either.

If anyone on the crew is switched out, the county or municipal fire department shall notify the local Forestry Division district office or Santa Fe Office and provide the names of the crew personnel being switched.

All personnel will follow the work rest guidelines in the Interagency Incident Business Management Handbook (Chapter 10).

Any equipment lost or damaged (non-personal) during the fire and caused by fire suppression activities shall be brought to the attention of the incident team or the agency responsible for fire suppression. Make sure proper paperwork is filled out and (Supply Number) S#'s are obtained prior to demobilization.

Inform the local Forestry Division district office and Santa Fe Office of ANY injury within a 4-hour period to ensure that the proper paperwork related to the injury is filled out and filed.

If meals and lodging are being provided by the incident, then meals and lodging purchased by the crew are not reimbursable.

# Resources will abide by rules and regulations set forth by the host agency in which the resource is assigned to.

# Demobilization:

RMP resources assigned to an incident shall check with the Plans Section on a regular basis to determine the date and time of planned demobilization. RMP resources shall follow established incident procedures when demobilizing, including:

2025

- clean up camp area;
- return of equipment issued by the incident;
- replacement or documentation of supplies and equipment used, lost, or damaged;
- demobilization inspection of engine and manifest; and
- closeout of personnel and equipment time records (the county or municipal fire department shall keep the originals for reimbursement).

RMP resources **will ask for** a performance evaluation by their direct incident supervisor prior to leaving the incident. Copies shall be provided to the sending agency and Forestry Division. If issues occur with demobilization, the resource shall contact its appropriate district or check at the ICP for a Forestry Division representative to aid resources with any issues or problems with the check-out process (see below).

# Assignment of RMP Liaison:

Forestry Division may designate and dispatch an RMP Liaison when RMP resources are assigned to an incident. The RMP Liaison must have a resource order. The RMP Liaison serves as an advisor on matters that relate to RMP resources and their management.

# **RMP** Liaison Job Description:

- serve as liaison between assigned resources, the Incident Management Team, the home unit, and any assigned agency representatives;
- operate primarily out of the Incident Command Post;
- assure all conditions of the RMP are being met with emphasis on safety;
- assist with daily personnel and equipment timekeeping and reporting;
- coordinate delivery of timesheets to local district Administrative Management Officer (AMO);
- coordinate with IMT Training Specialist to initiate and track training assignments for RMP participants;
- assure evaluations are conducted on RMP resources;
- communicate with RMP agencies and resources as requested;
- have no dual responsibilities; and
- have no responsibility for operations (line assignments).

# Assignment of RMP Agency Representatives:

Any single agency that commits five or more resources to an RMP assignment, at its discretion may assign an Agency Representative (AREP) to the incident. The AREP will serve as liaison between the agency, the agency's resources, and the RMP Liaison. To avoid confusion with operations, an AREP must have no fireline responsibilities.

AREPs must have a resource order. This position requires a red card with the AREP designation.

### Contacting EMNRD - Forestry Division and Interagency Dispatch Centers:

Refer to **APPENDIX A: EMNRD, FORESTRY DIVISION DISTRICT BOUNDARIES** and pages 47-48 for contact information of the Forestry Division district office servicing your fire department. Refer to **APPENDIX B: MAP OF NEW MEXICO INTERAGENCY DISPATCH ZONES** in which your fire department resides. Refer to page 50 for Interagency Dispatch contact information.

District Fire Management Officer, RMP Coordinator, or district office representative will be the Point of Contact (POC) between the Interagency Dispatch Center and cooperating county or municipal fire departments.

#### RMP Mobilization Initiated after an In-Jurisdiction Response:

The JPAs/MOAs between EMNRD and counties and municipalities also apply to the use of county and municipal resources within their own jurisdictions. This provision was developed in recognition that counties and municipalities have responsibility within their own jurisdiction and they set their own local standards, including those for physical fitness, experience, training, and qualifications. In-jurisdictional resources may be eligible for reimbursement after initial attack (four hours). In addition, a mutual aid response outside their jurisdiction (out of district) may also be eligible for reimbursement.

#### RMP Mobilization Initiated after a Mutual Aid Response:

An RMP mobilization may be initiated after an initial attack mutual aid response. Onscene mutual aid resources may be converted to an RMP resource using similar procedures as an original RMP mobilization. To be eligible for an RMP mobilization, each mutual aid resource must be red carded, and the request must be made through the Forestry Division. A resource order must be used to document the approval. The decision to convert mutual aid resources to RMP resources resides solely with the Forestry Division and will be based on consultations with the Incident Commander and the RMP Coordinator of the mutual aid resources. RMP rates are paid from the time the resource is changed from mutual aid to RMP resource.

# CHAPTER 5: ADMINISTRATVE PROCEDURES

#### Introduction:

The following information provides guidance on administrative procedures and reimbursement rates that apply to counties and municipalities who have agreed to participate in the RMP.

These procedures are based on the JPAs/MOAs between the Forestry Division and counties and municipalities.

The Forestry Division is the lead agency for the purpose of mobilization and reimbursement of county and municipal fire departments on fires within federal and non-federal jurisdictions.

The JPA/MOA is a contract between the Forestry Division and the county and municipality. Additional contracts (such as the U.S. Department of Agriculture (USDA) Emergency Equipment Rental Agreements) between the fire incident and fire department resources are not appropriate.

Generally, the RMP uses all Incident Command System forms and the Interagency Business Management Handbook procedures and forms. The Forestry Division will accept these forms for documentation and reimbursement, unless otherwise stated.

This RMP does not apply to the use of county or municipal resources within their own jurisdiction. The county or municipality is responsible for fire protection within its jurisdiction and for meeting local standards, including those for personnel qualifications, equipment standards, liability, and reimbursement. A directory of district office contact information is provided in Chapter 5.

# Personnel:

Career firefighter employees remain employees of the county or municipality during the incident. The Forestry Division will reimburse the county or municipality for their career firefighter employees who respond to an incident. County or municipal career firefighter employees will at all times remain covered under the county's or municipality's employee benefits, including worker's compensation. The Forestry Division shall not hire career firefighter employees during the incident.

Counties and municipalities will provide their written payroll policy to EMNRD Forestry Division, district offices including overtime pay, hazardous pay, compensatory time, and premium pay. Counties and municipalities will submit written policies at the time rate sheet agreements are submitted to the Forestry Division district offices.

## Personnel Reimbursement Rates:

The cost to a county or municipality for the use of a county or municipal fire department's career firefighter employees who respond during an incident under this RMP will be reimbursed based on the hours worked on the incident, at the employee's pay rate, including overtime and benefits. All RMP participants requesting hourly reimbursements must include a payroll record of actual costs incurred while on assignment including hourly rates.

The Forestry Division shall reimburse the county or municipal for career firefighter employees' regular pay, including overtime, pay differentials, benefits, travel, and per diem from their mobilization until their demobilization following procedures defined in the RMP.

# Pay Differentials:

• Hazard Pay

Firefighting – Participating as a member of a firefighting crew in fighting wildfires on the fireline before the fire is controlled. This includes single resource personnel assigned to the fireline. Personnel assigned firefighting duties are not entitled to hazard pay after the declaration of an official control time and date. This does not include personnel engaged in logistical support, service, and non-suppression activities (*e.g.*, media tours to the fireline, incident personnel driving to the fire to observe activities, or drivers delivering tools or personnel).

Fireline – For the purpose of hazardous duty pay administration, a fireline is defined as the area within or adjacent to the perimeter of an uncontrolled wildfire of any size in which action is being taken to control fire. Such action includes operations which directly support control of fire (*e.g.*, activities to extinguish the fire, ground scouting, spot fire patrolling, search and rescue operations, and backfiring).

Eligible hours for Hazard Pay must be clearly identified on Crew Time Reports (CTR). CTR comments section shall include daily division assignment and total eligible hazard pay hours circled. **County or municipal pay policies addressing hazard pay eligibility shall be submitted to the Forestry Division local district office by January 1 of each calendar year. Any changes in policy will need to be submitted for review and approval.** 

2025

## Personnel Timekeeping:

All employees will follow personnel timekeeping procedures established in the most current edition of the *Interagency Fire Business Management Handbook* at https://www.nwcg.gov/publications/pms902 unless otherwise specified in this RMP.

Some of the most common procedures include:

All on-shift time is compensable. All off-shift time is non-compensable.

All hours of actual travel are compensable and there is no limitation on hours. Waiting time and meal breaks during travel are non-compensable. Traveling from a sleeping facility to the work site, *e.g.*, incident base, fireline, dispatch office, strike team/task force/out-of-state assignment departure location or buying team location is considered on-shift travel and is compensable.

Compensable meal periods are the exception, not the rule. Meals on the fireline are considered on-shift only when the fire is not contained, and the Operations Section Chief has determined that it is critical that the crew remain at their duty post. Mealtime **MUST** be documented on the Crew Time Report and approved by the supervisor. After containment, meals on the fireline are considered off-shift.

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| (6)     | (7)   |              | (8)        |          | 9)           | (10)          |     |  |
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| н       | A. Brown                                      |              | ENOP       | 0630     | 1900         |               |     |  |
| Т       | R. Wyatt                                      |              | FFT1       | 0700     | 0930         |               |     |  |
| E       |   |              |            | 1000     | 1900         |               |     |  |
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| (11) RE | MARKS   |              |            |          |              |               |     |  |
|         | ard for fighting uncontrolled fire            | e on firelin | e          |          |              |               |     |  |
|         | to take a meal break due to blo               |              |            |          |              |               |     |  |
|         | tt traveled to incident to replace            |              |            | as inju  | red on       | 8/6           |     |  |
|         | Diff 25% for fighting uncontrol               |              |            |          |              |               |     |  |
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|         |   |              |            |          |              |               |     |  |
| (12) OF | FICER-IN-CHARGE (Signature)                   |              | (13) TITLE | E (Offic | er-in-C      | harge)        |     |  |
| Chris ; | Fire  |              |            |          | DIVS         |               |     |  |
|         | ME (Person Posting to Emerge                  | ncy Time R   | eport)     |          | (15) D/      | ATE           |     |  |
|         |   |              |            |          |              |               |     |  |



Off-shift consists of time spent sleeping and eating when free from actual work. It also includes other free time, when not on ordered standby. Examples of off-shift time include eating, sleeping, or breaks exceeding three hours during travel or time spent eating (time spent while waiting in an airport or stopping at a restaurant MUST be shown as a break on a CTR SF-261), sleeping, or on breaks in fire camp/spike camp rather than at the fireline.

Employees will receive compensation for actual hours worked. The only exception will be for county or municipal employees who are normally scheduled using extended onshift schedules (such as the 24 hours on and 48 hours off schedule, also called compressed tours). They will be paid from the actual time of mobilization to the normal end of shift or for actual hours worked, whichever is longer. Time earned on the incident during the county or municipal employee's normal off-shift periods will be paid by actual hours worked.

Resources on-shift for over 16 hours must have justification and approval on an "excess hours log" from a fireline supervisor. For additional information on-shift for over 16 hours, see Appendix E "Extended Work Shift Document Form."

All employees assigned to a general area, such as staging or fire camp, but not on ordered standby, will be given enough on-shift time to a total minimum of eight hours. On-shift time is computed in 15-minute increments. County or municipal career firefighter employees on a compressed time schedule will be paid for the number of hours that make up their normal schedule for that day. This guarantee does not apply on the first and last day of the assignment.

On-shift hours must be documented on a daily basis. Hours must be authorized by an incident supervisor's signature and reported to the Incident Commander or Finance Section Time Unit daily. Resources must use proper checkout procedures during demobilization. Approved timesheet documents include:

- USDA-Crew Time Report; or
- USDA/USDI-Emergency Firefighter Time Report (OF-288).

# Travel Reimbursement Guideline:

All travel and reimbursement requests must comply with the actual expenses incurred and be within the spending limits outlined in 2.42.2 NMAC, Regulations Governing the Per Diem and Mileage Act. All reimbursement requests must be submitted within 45 days of return or they may not be paid.

<u>County or municipal employees</u> may be provided with subsistence similar to New Mexico emergency employees. Counties and municipalities may be reimbursed for an employee's travel. Each person must provide **individual ITEMIZED receipts** for their actual expenses.

Prior to departing on a fire assignment, employees shall be aware of any anticipated travel expenses. When traveling to an actual incident where fire camp has been set up, employees typically expect to incur expenses when traveling to and from fire camp (meals, hotels). Depending on the assignment, car rental or private vehicle mileage may be necessary and will be authorized and documented on the resource order. Employees shall be prepared to be self-sufficient for the entire detail if necessary. The position and the type of incident (fire, pre-positioning) will usually determine the out-of-pocket expenses expected, but if in doubt, the RMP is responsible for calling the ordering agency for clarification which shall be done prior to taking the assignment if being self-sufficient is an issue.

Turn in receipts as soon as possible after end of assignment and no more than 45 days after the end of the return travel period

Tape receipts to 8.5 X 11-inch paper in chronological order (by date AND time) for each 24-hour period. The 24-hour day starts at the time you left on your assignment (e.g., if you leave at 6 a.m., your 24-hour day starts at 6 a.m. and ends at 5:59 a.m. the next day). Do NOT include more than one day's receipts on a page. Do NOT highlight any writing on the receipts.

Lodging receipts must have payment method attached (credit card receipt) or written on or beside the receipt (check number or cash).

All travel and reimbursement requests must comply with the actual expenses incurred and be within the spending limits outlined in 2.42.2 NMAC, Regulations Governing the Per Diem and Mileage Act. All reimbursement requests must be submitted within 45 days of return or they may not be paid.

Expenses are generally reimbursed only for travel days and days when the fire is not providing meals and lodging. A written explanation or Supply Resource Order number (S#) must be provided to get reimbursement for any expenses while working on the fire.

Personal expenses are NOT reimbursed (toothpaste, etc.). To make processing the reimbursement request easier, please make non-reimbursable purchases separately.

Grocery receipts are acceptable, but the receipts must be within the daily meal allowance rates. Any grocery receipt that includes personal items, general merchandise, gum, medicine, or alcohol will not be reimbursement by the Forestry Division.

Meal receipts must be itemized and must include the following information: (Receipts that are not itemized, including all tips, or receipts that are illegible, will not be reimbursed).

- Date
- Time

Rev. 12-23-24

- Name of restaurant
- Amount
- Handwritten tips on itemized tip line only
- Itemized items you had to eat

Tips must not be more than 20% per meal. Tip amounts exceeding 20% per meal will not be reimbursed. Handwritten tips on the itemized tip line on a receipt will only be accepted for reimbursement.

Credit card receipts only are not reimbursable as they do not itemize what you had to eat. Itemized receipts must be included. Handwritten - items beside the taped receipt are not reimbursable.

Some receipts fade in the heat. Don't expose them to sunlight or let them sit in a hot vehicle. Any receipt that is not readable is not eligible for reimbursement. Handwritten items next to a receipt are not allowed.

Engine bosses are responsible for helping their crew members with the accuracy and completeness of their paperwork, including timecards, resource orders, AND financial reimbursements.

Personnel will not be reimbursed for meals and lodging purchased on behalf of other personnel. All personnel need to be self-sufficient.

Lost Receipt Affidavits and any Lodging that exceeds \$215 per night per room, including taxes, must be approved by the local government head, or their approved representative. Forestry Division will not reimburse any invoices without proper approvals.

# Maximum Crew Weight for Aircraft Travel:

The NWCG standard for maximum flight weight limits of all crews is 5,300 pounds. All personnel, (excluding Smokejumpers, Rappelers, and Helicopter Managers), dispatched off their unit must conform to the following limitations: One frameless, soft pack, not to exceed 45 pounds. • Web gear or briefcase (not both), not to exceed 20 pounds. • Maximum allowable crew weight, including equipment, is 5,300 pounds (6,625 pounds for 25 person crews). Additional information found on page 16 at: https://gacc.nifc.gov/swcc/dispatch\_logistics/dispatch/mobguide/mobguide.htm

# **Reimbursement for Crew Rotation:**

Crew and equipment rotation before the minimum five-day in-state and 14-day out-ofstate mobilization requirement will be made only in emergency situations.

If the early demobilization is conducted at the request of the county or municipality, the resources traveling home will not be eligible for return travel. Also, replacement resources will not be eligible for reimbursement for travel to the incident.

If the early demobilization is conducted at the request of the incident and is documented using a resource order, the resources traveling home will be eligible for reimbursement of return travel. Replacement resources will also be eligible for reimbursement as if they were new resources.

## Requesting Reimbursement for Personnel:

# Only individuals and equipment specified on resource orders will be paid.

Counties or municipalities must submit reimbursement requests for their career firefighter employees to the local Forestry Division district office within 45 days upon return to their home unit after demobilization.

# Worker's Compensation:

The Forestry Division will not hire career firefighter employees of the county or municipality during the incident as Forestry Division emergency "administratively determined" (AD) employees. County or municipal career firefighter employees will at all times remain covered under the county's or municipality's employee benefits, including worker's compensation.

The first rule for any on-the-job injury is to treat the injury with first aid and to provide appropriate medical care. The Logistics Section-Medical Unit Leader shall coordinate treatment of injuries on the incident. All on-the-job injuries shall be reported to the supervisor, who in turn will report to the incident Compensation-Claims Unit in the Finance Section. All injuries shall be reported immediately to the nearest Forestry Division district office and the responsible county or municipality. Instructions and downloadable forms can be found at https://workerscomp.nm.gov/NMWCA-Forms.

# Equipment:

All equipment assigned to an incident **must** be documented on a Resource Mobilization Plan Rate Sheet and must not exceed the number of operators on the rate sheet for unstaffed rates. If the number of operators exceeds the rate sheet, the Forestry Division will not reimburse the county or municipality for additional operators unless prior authorization has been secured. The rate sheet must be current (see Chapter 6) and be signed by the authorized signatory for the county or municipality and the Forestry Division. The authorized signatory for the Forestry Division is the Resource Protection Bureau Chief or the State Fire Management Officer.

# Equipment Check-In:

The county or municipality designated equipment operator (or the Engine Boss/Strike Team Leader) must check-in all equipment at the incident before proceeding to an assignment.

Check-in includes:

Planning Section-Resource Unit:

- Complete ICS-211: Check-In Form
- Receive assignment with shift plan and maps

Finance Section-Time Unit:

- Provide copy of *NM-RMP Rate Sheets* for your resource with reimbursement rates
- Emergency Equipment Use –Invoice, USDA/USDI Form OF286

Logistics Section-Ground Support:

- Provide equipment and supply manifest
- Conduct an equipment inspection; Equipment Inspection Checklist: USDA/USDI-Form 296
- Initiate Equipment Shift Ticket: USDA/USDI Form 297

On smaller fires, these functions may be the Incident Commander's responsibility.

## Equipment Reimbursement Rates:

All equipment furnished must be in satisfactory condition. The Forestry Division reserves the right to reject equipment that is not in safe and operative condition.

Dry rate is equipment only. Wet rate incorporates equipment as well as career firefighter employees or volunteer firefighters.

County and municipal fire department equipment will be reimbursed for actual hours worked while on-shift unless actual hours worked is less than eight hours and the minimum daily rate is appropriate.

County and municipal fire department-owned equipment may receive a daily minimum guarantee (when designated on the Reimbursement Rate Sheet) except on the first and last day of travel. The first and last day will be based on the actual hour's on-shift.

The daily minimum guarantee does not apply to equipment on loan to the county or municipality through the Federal Excess Property Program (FEPP). FEPP equipment will always be reimbursed for actual hours worked.

All fuel receipts, equipment shift tickets as well as vehicle logs to include g-plate, date of transaction, purpose of trip, start/ending mileage, fuel type, fuel quantity, and total cost shall be submitted with reimbursement request. Wright Express (WEX) or other fleet fueling documentation with activity detail will be accepted, including OF-304 Emergency Equipment Fuel and Oil Issue from the fire.

The county or municipality bears equipment operating expenses. Operating expenses include oil, filters, and lube/oil changes. The Forestry Division may, at its option, choose to furnish these items when necessary to keep the equipment operating at an incident.

45

The county or municipality shall make and pay for repairs to equipment. The Forestry Division, at its option, may choose to furnish repairs when necessary to keep the equipment at an incident. The cost of repairs provided may be deducted from reimbursement if the damage is not attributable to the incident. If a replacement vehicle is sent to the incident without the hosting agency's knowledge and the Forestry Division's approval, the replacement resource <u>WILL NOT</u> be reimbursed.

County and municipal employees' or volunteers' personal vehicles used during mobilization will not be eligible for reimbursement.

Certain equipment is eligible for a negotiated rate as designated on the RMP Rate Sheets. These rates are in addition to the work rate. This rate only applies when equipment is used. This rate is not authorized for equipment sitting in camp. FEPP vehicles do not qualify for daily rates.

The Resource Protection Bureau Chief or designee may negotiate rates for equipment not specified in the RMP rate schedule and shall document the negotiated rates for an incident in writing. A chainsaw, pump, or dump tank already part of the standard equipment for an engine or water tender will not be given a separate rate. It may be eligible if the equipment is used outside the resources original assignment at the request of the incident. All equipment must have a unique resource order number to be eligible for reimbursement ("E" number).

| RMP   | Equipment                   | Reimburse                 | ment Rates                    | s 2025   |
|---|-----------------------------|---------------------------|-------------------------------|--|
| Resource & Type                                   | Unstaffed Rate<br>(dry/hr.) | Staffed Rate<br>(wet/hr.) | Daily Minimum<br>Guarantee *1 | Description/Accessories  |
|   | T                           | ENGINE *4                 |                               | 1  |
| Engine, Type 1                                    | \$181.50                    | \$242.00                  | \$1,452.00                    | 300 (gal) - 1-000 (gal/min) - 150 (psi)<br>- 4 (minimum)               |
| Engine, Type 2                                    | \$169.40                    | \$229.90                  | \$1,355.20                    | 300 (gal) - 500 (gal/min) - 150 (psi) -<br>3 (minimum)                 |
| Engine, Type 3 *2                                 | \$145.20                    | \$205.70                  | \$1,161.60                    | 500 (gal) - 150 (gal/min) - 250 (psi) -<br>3 (minimum)                 |
| Engine, Type 4 *2                                 | \$138.60                    | \$199.10                  | \$1,108.80                    | 750 (gal) - 50 (gal/min) - 100 (psi) –<br>2 (minimum)                  |
| Engine, Type 5 *2                                 | \$133.10                    | \$193.60                  | \$1,064.80                    | 400 (gal) - 50 (gal/min) - 100 (psi) –<br>2 (minimum)                  |
| Engine, Type 6 *2                                 | \$108.90                    | \$169.40                  | \$871.20                      | 150 (gal) - 50 (gal/min) - 100 (psi) –<br>2 (minimum)                  |
| Engine, Type 7                                    | \$82.50                     | \$143.00                  | \$660.00                      | 50 (gal) - 10 (gal/min) - 100 (psi) –<br>2 (minimum)                   |
|   | W                           | ATER TENDER *2,           | *4                            |  |
| Support Tender Type 1                             | \$119.90                    | \$138.05                  | \$959.20                      | 4,000 (gal) - 300 (gal/min) - 50 (psi) -<br>30 (minutes) - 1 (minimum) |
| Support Tender Type 2                             | \$108.90                    | \$127.05                  | \$871.20                      | 2,500 (gal) - 200 (gal/min) - 50 (psi) -<br>20 (minutes) - 1 (minimum) |
| Support Tender Type 3                             | \$90.20                     | \$108.35                  | \$721.60                      | 1,000 (gal) - 200 (gal/min) - 50 (psi) -<br>15 (minutes) - 1 (minimum) |
| Tactical Tender Type 1                            | \$130.90                    | \$167.20                  | \$1,047.20                    | 2,000 (gal) - 250 (gal/min) - 150 (psi)<br>- N/A - 2 (minimum)         |
| Tactical Tender Type 2                            | \$113.30                    | \$149.60                  | \$906.40                      | 1,000 (gal) - 250 (gal/min) - 150 (psi)<br>- N/A - 2 (minimum)         |
|   |                             | MEDICAL *3, *4            |                               |  |
| Ambulance, Any                                    | \$108.90                    |                           | \$871.20                      |  |
| EMTB, Basic Life Support (BLS)<br>*14             | \$64.90                     |                           | \$519.20                      | 1 BLS kit, 4x4 pickup or SUV   |
| EMTB, Basic Life Support (BLS)<br>*14             | \$77.40                     |                           | \$619.20                      | 1 BLS kit, 4x4 pickup or SUV, UTV w/ trailer                           |
| AEMT, Intermediate Life Support (ILS) *14         | \$75.90                     |                           | \$607.20                      | 1 ILS kit, 4x4 pickup or SUV   |
| AEMT, Intermediate Life Support (ILS) *14         | \$88.40                     |                           | \$707.20                      | 1 ILS kit, 4x4 pickup or SUV, UTV w/ trailer                           |
| EMTP, Advanced Life Support (ALS) *14             | \$86.90                     |                           | \$695.20                      | 1 ALS kit, 4x4 pickup or SUV   |
| EMTP, Advanced Life Support (ALS) *14,            | \$99.40                     |                           | \$795.20                      | 1 ALS kit, 4x4 pickup or SUV, UTV<br>w/ trailer                        |
| Rapid Extraction Module (REM)<br>Type 1           | \$187.50                    |                           | \$1,508.00                    | Refer RMP Guide Pg 21 and PMS 552 for equipment list                   |
| Rapid Extraction Module (REM)<br>Type 2           | \$167.50                    | -                         | \$1, 348.00                   | Refer RMP Guide Pg 21 and PMS 552 for equipment list                   |
| Rapid Extraction Module (REM)<br>Type 3 (Support) | \$147.50                    | _                         | \$1, 080.00                   | Refer RMP Guide Pg 21 and<br>PMS 552 for equipment list                |

# **RMP Equipment Reimbursement Rates 2025**

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

| Resource & Type  | esource & Type Unstaffed Rate Staffed Rate (dry/hr.) (wet/hr.) |              |              |                 | Description/Accessories  |  |  |
|--|--|--------------|--------------|-----------------|--|--|--|
|  |  | FIRE CR      | EW *1, *4    |                 |  |  |  |
| Hand Crew or Module  |  | +\$32.0      | 0/person     | 8 Hours *1      |  |  |  |
|  | T  | RANSPOF      |              | *4              |  |  |  |
| Crew Carrier *7  | \$300.00/day   |              |              |                 |  |  |  |
| Command Vehicle  | \$100.00/day   |              |              |                 | Used for fireline transportation of<br>strike team/task force leaders or<br>other OH staff |  |  |
| Ground Support   |  |              | \$37.50      | \$300.00        | Used for transporting supplies, have handheld radio avail.                                 |  |  |
| Utility Terrain Vehicle (UTV) *8,<br>*10, *11,                           | \$200.00/day   |              |              |                 | Passengers & Equipment Only  |  |  |
| Utility Terrain Vehicle (UTV) for<br>Fire Suppression *8, *10, *11, *12, | \$237.87/day   |              |              |                 | Passengers & Equipment with<br>water/pump capability and/or slip on                        |  |  |
| All-Terrain Vehicle (ATV) *9, *11,                                       | \$53.90/day  |              |              |                 |  |  |  |
|  | FEDERAL EXES   | S PERSO      | NAL PROI     | PERTY (FEPP) *4 |  |  |  |
| FEPP: ¾-1.5T   | \$35.00  | +\$16.5      | 0/person     | None            |  |  |  |
| FEPP: 1¾-5T  | \$45.00  | +\$16.5      | 0/person     | None            |  |  |  |
| FEPP: 10 T   | \$50.00  | +\$16.5      | 0/person     | None            |  |  |  |
| FOLD A TANK/PUMPKIN *4   |  |              |              |                 |  |  |  |
|  | Pumpkin -  | \$125.00/day |              |                 |  |  |  |
| Pu   | mpkin - 1,000 Gal-1  | \$150.00/day |              |                 |  |  |  |
| Pu   | mpkin - 2,000 Gal-2  | \$175.00/day |              |                 |  |  |  |
| Pu   | mpkin - 3,000 Gal-4  | \$200.00/day |              |                 |  |  |  |
| Pu   | mpkin - 5,000 Gal-6  | \$250.00/day |              |                 |  |  |  |
|  | Pumpkin - 10,0   | 000 Gal+     | \$275.00/day |                 |  |  |  |

- \*1 Minimum Daily Guarantee based on eight hours times the <u>unstaffed work rate</u>. Only applies when equipment is in service. Guaranteed each calendar day. Only actual hours worked applies on the first and last day. Other exceptions may apply.
- \*2 All water tenders and engine Types 3 through 6 shall be able to prime and pump water from a 10-foot lift and are required to carry one or more drop tanks as standard equipment. Any additional pumpkins will need a separate agreement and be paid the rates set above.
- \*3 With two or four EMS providers. Salary will be billed separately. Only county or municipal sponsored EMTs are eligible.
- \*4 Equipment is authorized by resource order. Not applicable to personal vehicles used during mobilization.
- \*5 Rate applies when equipment is used. No rate authorized for equipment sitting in camp.

- \*6 "Crew Carrier" is a vehicle that has a minimum of five or more passengers with equipment. This rate is only applicable for vehicles used to transport hand crews or modules doing hand crew work.
- \*7 UTV is an all-terrain off-road utility vehicle capable of carrying two or more passengers "side by side".
- \*8 ATV is an all-terrain vehicle with a single-passenger occupancy.
- \*9 All ATV/UTV operators must be certified with proper training with the ability to provide such certification to the Forestry Division.
- \*10 Per day charge includes any transportation needs (example trailer) for ATV/UTV.
- \*11 Minimum pump capacity is 8 GMP and 30 gallons of water is required on the UTV to qualify under this rate.
- \*12 Daily usage of miles or hours must be documented on shift tickets.
- \*13 We will pay for 1 bag and the rate is dependent on the highest qualified bag. If an additional bag is necessary, then the bag will be billed separately as Emergency Medical Service Kit and requires a General Message.
- \*14 If UTV is included the RO should include the VIN and License #.

#### Equipment Timekeeping:

Equipment timekeeping will follow established procedures in the most current information can be found at <u>https://www.fs.usda.gov/managing-land/fire/ibp</u>, unless otherwise specified in this RMP. Some of the most common procedures include:

To be on-shift, equipment must be staffed and available to perform work in a safe and operative condition.

On-shift includes travel from the fire camp to the fireline, ordered standby, and actual work.

Off-shift consists of time equipment is out of service while crews are sleeping and eating when free from actual work. It also includes other free time, when not on ordered standby. Examples of off-shift time include when equipment is unavailable because crews are eating, sleeping, or on breaks exceeding three hours during travel or eating, sleeping, or breaks in fire camp/spike camp rather than on the fireline. Equipment under repair exceeding two hours is considered unavailable for work and off-shift.

On-shift hours must be documented to the nearest 15 minutes. Daily rates are documented based on the calendar day.

On-shift hours must be documented on a daily basis. Hours must be authorized by an incident supervisor's signature and reported to the Incident Commander or Logistics Section-Equipment Manager. Equipment timesheet documents include:

*Emergency Equipment Shift Ticket, USDA/USDI OF-297.(Printed multi-part version)* 

| DFE-07-0592           3. INCIDENT OR PROJECT NAME         4. INCIDENT NUMBER           Big Fire         ID-1FD-01235           6. EQUIPMENT MAKE         7. EQUIPMENT MODEL           CAT         Dé           9. SERIAL NUMBER         10. LICENSE NUMBER           47A19625         N/A |       |      |          |                        | <ol> <li>CONTRACTOR (name)         Do-Right Construction     </li> <li>OPERATOR (name)         Peter Pulaski     </li> </ol> | FINANCE | ACTOR  | RECORDER | (RETAIN IN BOOK) |
|---|-------|------|----------|------------------------|--|---------|--------|----------|------------------|
|   | START |      | HOURS/DA | Y/MILE: (ciritale one) |  | ANCE    | TOR    | CORDE    | ETAIN IN         |
| 7/22/xx   | 1300  | 1700 | 4        | 50,100 mile            | s  | FIN     | NTRACI | IME REC  | PY (RE           |
| 7/22/xx   | 1730  | 2000 | 2.5      | 50,286 mile            | 15. EQUPMENT STATUS<br>S M a. Inspected and under agreement  | 1       | 8      | MENT T   | FILE CO          |
|   |       |      |          | 186 total mile         | c. Withdrawn by Contractor   |         |        | EQUIP    | FFICE            |
|   |       |      |          |                        | 16. INVOICE POSTED BY (Recorder's initials)  |         |        |          | ING OI           |
| 17. CONTRACTORS OR AUTHORIZED AGENTS SIGNATURE<br>18. GOVERNMENT OFFICERS SIGNATURE 19. DATE SIGNED<br>Feter Fulnuki Surve 7/22/xx  |       |      |          |                        |  |         |        |          | ORDERIN          |
| NSN 7540-01-119-5626 OPTIONAL FORM 297 (7-90)<br>50297-102 USDA/USDI  |       |      |          |                        |  |         |        |          |                  |
|   |       |      |          |                        |  |         |        |          |                  |

Emergency Equipment Shift Ticket, Optional Form 297 (Rev.5/2024) PDF Fillable Version

| 1. Agreement Number:       2. Contractor/Agency Name:       3. Resource Order Number:         4. Incident Name:       5. Incident Number:       6. Financial Code:         7. Equipment Make/Model:       8. Equipment Type:       9. Serial/VIN Number:       10. License/ID Number:         11. If applicable check and complete the following boxes. Use MILITARY TIME and/or real odometer reading.       12. Transport Retained? Yes       No         Equipment         13. Is this a First/Last Ticket? (Check if yes)       14. Miles       Hours       Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         15. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         Personnel         22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       9. Note Travel/Other remarks         30. Remarks – Provide details of any equipment breakdown or operating issues. Include other information as necessary.         32. Contractor/Agency Representative (Printed Name)         32. Contractor/Agency Representative (Signature)   |  |                                       |                     |          |            | Eme    | eraen                         | cy Equir     | m     | ent Shift      | Tic  | ket      |                                   |          |       |                         |             |
|---|--|---------------------------------------|---------------------|----------|------------|--------|-------------------------------|--------------|-------|----------------|------|----------|-----------------------------------|----------|-------|-------------------------|-------------|
| 7. Equipment Make/Model:       8. Equipment Type:       9. Serial/VIN Number:       10. License/ID Number:         11. If applicable check and complete the following boxes. Use MILITARY TIME and/or real odometer reading.       12. Transport Retained? Yes       No         Equipment       Equipment         13. Is this a First/Last Ticket? (Check if yes)       14. Miles       Hours       Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         15. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         Personnel         22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         a         a         a       a       a         a       a         a         Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)   | 1. Agreement Number: 2. Contractor/Agency Na |                                       |                     |          |            |        | me: 3. Resource Order Number: |              |       |                |      |          |                                   |          |       |                         |             |
| 11. If applicable check and complete the following boxes. Use MILITARY TIME and/or real odometer reading. 12. Transport Retained? Yes       No         Equipment         11. If applicable check and complete the following boxes. Use MILITARY TIME and/or real odometer reading. 12. Transport Retained? Yes       No         It is a First/Last Ticket? (Check If yes)       14. Miles       Hours       Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         15. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         Personnel         22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         30. Remarks – Provide details of any equipment breakdown or operating issues. Include other information as necessary.         31. Contractor/Agency Representative (Printed Name)  | 4.   | 4. Incident Name: 5. Incident Number: |                     |          |            |        |                               | imber:       | _     |                | _    |          | 6. F                              | inancial | Cod   | le:                     |             |
| 11. If applicable check and complete the following boxes. Use MILITARY TIME and/or real odometer reading. 12. Transport Retained? Yes       No         Equipment         11. If applicable check and complete the following boxes. Use MILITARY TIME and/or real odometer reading. 12. Transport Retained? Yes       No         It is a First/Last Ticket? (Check If yes)       14. Miles       Hours       Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         15. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         Personnel         22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         30. Remarks – Provide details of any equipment breakdown or operating issues. Include other information as necessary.         31. Contractor/Agency Representative (Printed Name)  | 7  | Equipment Make                        | Model               | 8 Eau    | upment T   | vne:   |                               | 9 Set        | ial/  | //IN Numbe     | r    |          | 10                                | License  |       | lumber                  |             |
| Equipment         Equipment         Total         13. is this a First/Last Ticket? (Check if yes)       14. Miles       Hours       Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         Mobilization       Demoking       Demoking       Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         15. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         Personnel         22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         a         a         a         a         a         a         Bersonnel         a         a         a         a         a         a         a         a         a         a         a         a         a </td <td></td> <td>Equipment Make</td> <td>, model.</td> <td>0. Lq</td> <td>apmont</td> <td>ypu.</td> <td></td> <td>5. 00</td> <td>icity</td> <td>vine realition</td> <td></td> <td></td> <td>10.</td> <td>License</td> <td></td> <td>umber.</td> <td></td>  |  | Equipment Make                        | , model.            | 0. Lq    | apmont     | ypu.   |                               | 5. 00        | icity | vine realition |      |          | 10.                               | License  |       | umber.                  |             |
| 13. Is this a First/Last Ticket? (Check if yes)       14. Miles       Hours       Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         15. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         15. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         16. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         17. Date       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         18. Date       19. Quantity       20. Type       21. Note Travel/Other remarks         19. Quantity       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         30. Remarks – Provide details of any equipment breakdown or operating issues.       Include other information as necessary.       32. Contractor/Agency Representative (Signature)       32. Contractor/Agency Representative (Signature)  | 11.  | If applicable ch                      | eck and complete    | the foll | owing box  | (es. l | Jse MI                        |              |       |                | odo  | meter r  | eadin                             | g. 12. T | rans  | port Retained? Yes      | No          |
| Mobilization       Demobilization       Mapples to blocks 16-18 below, Blocks 19-20 Special Rates, indicate type and quantity (ex: 1 Day)         15. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         16. Date       16. Start       17. Stop       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         17. Date       18. Total       19. Quantity       20. Type       21. Note Travel/Other remarks         18. Date       19. Quantity       20. Type       21. Note Travel/Other remarks         19. Quantity       20. Type       21. Note Travel/Other remarks         19. Quantity       20. Type       21. Note Travel/Other remarks         22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         30. Remarks – Provide details of any equipment breakdown or operating issues. Include other information as necessary.       31. Contractor/Agency Representative (Printed Name)       32. Contractor/Agency Representative (Signature)  | 12   | le this a Eirst/Le                    | et Ticket2 (Check   | if yee)  | 44 14110   |        |                               |              | ome   | ent            |      |          |                                   |          |       |                         |             |
| One can be and the c | 13.  |                                       |                     | li yes)  |            |        |                               |              | )     | Blocks 19-2    | 0 Sp | ecial R  | ates,                             | indicate | type  | e and quantity (ex: 1 D | )ay)        |
| 22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         20. Remarks – Provide details of any equipment breakdown or operating issues.       Include other information as necessary.         31. Contractor/Agency Representative (Printed Name)       32. Contractor/Agency Representative (Signature)  | 15.  | Date                                  | 16. Start           | 17.      | Stop       |        | 18. To                        | tal          |       | 19. Quantit    | y    | 20. Ty   | /pe 21. Note Travel/Other remarks |          |       |                         |             |
| 22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         20. Remarks – Provide details of any equipment breakdown or operating issues.       Include other information as necessary.         31. Contractor/Agency Representative (Printed Name)       32. Contractor/Agency Representative (Signature)  |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| 22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         20. Remarks – Provide details of any equipment breakdown or operating issues.       Include other information as necessary.         31. Contractor/Agency Representative (Printed Name)       32. Contractor/Agency Representative (Signature)  |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| 22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         20. Remarks – Provide details of any equipment breakdown or operating issues.       Include other information as necessary.         31. Contractor/Agency Representative (Printed Name)       32. Contractor/Agency Representative (Signature)  |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| 22. Date       23. Operator Name (First & Last)       24. Start       25. Stop       26. Start       27. Stop       28. Total       29. Note Travel/Other remarks         20. Remarks – Provide details of any equipment breakdown or operating issues.       Include other information as necessary.         31. Contractor/Agency Representative (Printed Name)       32. Contractor/Agency Representative (Signature)  |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| 30. Remarks – Provide details of any equipment breakdown or operating issues. Include other information as necessary.         31. Contractor/Agency Representative (Printed Name)         32. Contractor/Agency Representative (Signature)  |  |                                       | 1                   |          |            |        |                               | Pers         | oni   | nel            |      |          |                                   |          |       |                         |             |
| 31. Contractor/Agency Representative (Printed Name) 32. Contractor/Agency Representative (Signature)  | 22   | Date                                  | 23. Operator Nar    | ne (Fir  | st & Last) | 24.    | Start                         | 25. Stop     |       | 26. Start      | 27.  | Stop     | 28.                               | Total    | 29.   | Note Travel/Other re    | emarks      |
| 31. Contractor/Agency Representative (Printed Name) 32. Contractor/Agency Representative (Signature)  |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| 31. Contractor/Agency Representative (Printed Name) 32. Contractor/Agency Representative (Signature)  |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| 31. Contractor/Agency Representative (Printed Name) 32. Contractor/Agency Representative (Signature)  |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| 31. Contractor/Agency Representative (Printed Name) 32. Contractor/Agency Representative (Signature)  |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
|   | 30   | Remarks – Pro                         | vide details of any | equipr   | ment brea  | kdow   | n or op                       | erating issu | les   | . Include ot   | her  | informa  | tion a                            | is neces | sary. |                         |             |
|   |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
|   | 31   | Contractor/Age                        | ncy Representativ   | e (Prin  | ted Name   | )      |                               |              | 32    | . Contracto    | r/Ag | ency R   | epres                             | entative | (Sig  | nature)                 |             |
| 20. Juli da de Constante (Dela de Marco e Dela constante)   |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| 33. Incident Supervisor (Printed Name & Resource Order number) 34. Incident Supervisor (Signature)  | 33   | Incident Superv                       | visor (Printed Nam  | e & Re   | source O   | rder n | umber                         | )            | 34    | . Incident S   | upe  | rvisor ( | Signa                             | ture)    |       |                         |             |
|   |  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          |       |                         |             |
| OPTIONAL FORM 297 (REV. 5/2024  | -  |                                       |                     |          |            |        |                               |              |       |                |      |          |                                   |          | OPT   | FIONAL FORM 297 (I      | REV. 5/2024 |

Equipment must use proper checkout procedures during demobilization. The Finance Section or Forestry Division representative may complete the final equipment use invoice.

• Emergency Equipment; use Invoice, USDA/USDI Form OF-286.

# Equipment Travel and Transport:

When practical and necessary, equipment may be transported to and from an incident at the Forestry Division's expense.

If extended travel or transport is necessary, county or municipal-owned equipment will receive the daily minimum guarantee (as designated on the Reimbursement Rate Guide), except on the first and last day of travel. The first and last day will be based on the actual hours on-shift.

County or municipality shall be prepared to cover expenses for travel, including gas, oil, maintenance, food, and lodging. It is recommended a county or municipal credit card be assigned for this purpose. Expenditures may be eligible for reimbursement as described in the Administrative Procedures Chapter.

## Equipment Reimbursement Procedures:

County or municipality will be reimbursed for equipment use. Send equipment reimbursement request to emnrd-fd-fire\_billings@emnrd.nm.gov with a cc to Administrative Management Officer (AMO), Fire Management Officer (FMO), and RMP Coordinator within **45 days** of demobilization. Requests submitted later may not be paid.

Reimbursement requests shall include the emergency equipment use invoice (OF 286), shift tickets and a copy of the resource order for documentation. The reimbursement request shall consist of:

- RMP reimbursement invoice;
- crew time reports (SF 261);
- equipment shift tickets (OF 297);
- incident time report (OF 288s) and emergency equipment use invoice (OF 286), if applicable;
- all itemized meals and lodging receipts that are reimbursable;
- copy of resource order;
- copy of the resource order "S #'s" for any repairs or replacements, and receipt of purchase;
- copies of performance evaluations;
- county or municipal employee itemized rate and scheduled calendar;
- copy of RMP agreement rate sheet;
- extended work shift form, if applicable; and
- fuel deductions.

#### Equipment/Personnel Accidents, Injuries, and Illnesses:

## IMPORTANT NOTICE!!! PLEASE BE ADVISED:

If an injury is very serious and possibly life-threatening, the employee must be transported to the nearest emergency medical facility. In such cases, call 911 or the nearest medical facility to determine whether emergency medical personnel shall be dispatched.

County or municipality is responsible for providing all necessary documentation for equipment and personnel claims.

Employees injured while on duty are required to notify their supervisor within 24 hours of the injury. In the event of an injury/illness, the supervisor must ensure the appropriate forms are completed correctly and timely.

Agreements between state and federal agencies require each party waive all claims against every other party for compensation for any loss or damage (including personal injury or death) occurring in consequence of the performance of cooperative fire suppression work.

Neither the Forestry Division nor the county or municipality shall be responsible for liability incurred as a result of the other party's acts or omissions in connection with the JPA/MOA. Any liability incurred in connection with the Agreement is subject to the immunities and limitations of the Tort Claims Act, NMSA 1978, Section 41-4-1 *et seq*.

Because of the importance in determining the circumstances involved in every accident or loss, all on-the-job accidents or losses to equipment, vehicles, supplies, or property will be immediately reported to the supervisor who, in turn, will report to the Incident Compensation-Claims Unit in the Finance Section. All accidents or losses involving state or county or municipal-owned materials shall also be reported immediately to the nearest Forestry Division district office and the responsible county or municipality.

# Local Government Employee Responsibilities:

- Notify county or municipal supervisor immediately.
- Notify incident commander/designee and nearest Forestry Division district office.
- Identify any witnesses to the accident/loss.
- Prepare a written statement describing the accident or loss.
- Take photographs.

# Local Government Supervisor Responsibilities:

- Verify appropriate incident sections/units and the nearest Forestry Division district office have been notified.
- Ensure proper risk management forms and processes are completed in accordance with county or municipal policies.

# Forestry Division Responsibilities:

- Cooperate and assist with investigation as needed for an accident.
- Serve as liaison with county or municipality and other entities.

# Incident Host/Incident Management Team Responsibilities:

Although Incident Host or Incident Management Teams are not parties to the JPA/MOA between the Forestry Division and the county or municipality, they shall strive to assist in the implementation of the RMP. Copies of this RMP and appropriate forms will be made available to Incident Management Teams.

Generally, the Forestry Division does not use USDA Emergency Equipment Rental Agreements for county or municipal equipment. Contracts are developed using JPAs or MOAs with the State of New Mexico. Equipment rates are determined based on the RMP.

# Incident Management Teams can use the RMP rates to complete Emergency Equipment-Use Invoices.

# Supply Reimbursement Procedures:

For each piece of equipment, the designated equipment operator shall have a manifest that documents what supplies the equipment arrived at the incident with. The county or municipal fire department wildland fire coordinator or designee shall compile a list of the county's or municipality's expendable supplies used during the incident (expendable supplies include batteries, first aid items, hand tools, and PPE that is no longer serviceable) and submit that list to the fire department wildland fire coordinator's incident supervisor for approval before departure from the incident. In most cases, the Logistics Section-Supply Unit at the incident will replace the supplies prior to demobilization from the incident.

Expendable supplies not replaced at the incident will be reimbursed at cost or replaced in-kind by the Forestry Division at its discretion. Coordinate with the local Forestry Division district office. Requests submitted without proper documentation and a resource order will not be paid.

Reimbursement for supplies will be based on the list of expendable supplies approved for replacement by the incident supervisor. This list must be documented and approved on a general message ICS 213 form. The county or municipality will invoice the Forestry Division for the actual replacement cost of supplies only with an approved S # from the incident. The cost of supplies will be fully documented, including the invoice furnished to the Forestry Division with the reimbursement billing.

## CHAPTER 6: DIRECTORY

#### **Directory of EMNRD, Forestry Division District Offices**

## CHAMA DISTRICT (NMS-N1S)

Jose Carrillo District Forester HC 75, Box 100 Chama, New Mexico 87520

Pablo Montenegro Fire Management Officer

## CIMARRON DISTRICT (NMS-N2S)

Mary Stuever District Forester P.O. Box 5 Ute Park, New Mexico 87749

Justin Williams Fire Management Officer

#### SOCORRO DISTRICT (NMS-N3S)

James "Zoni" Anzalone District Forester 1701 Enterprise Socorro, New Mexico 87801

Andrew Lopez Fire Management Officer

#### LAS VEGAS DISTRICT (NMS-N4S)

Shannon Atencio District Forester HC 33, Box 109 #4 Las Vegas, New Mexico 87701

VACANT Fire Management Officer

## **CAPITAN DISTRICT (NMS-N5S)**

Nick Smokovich District Forester P.O. Box 277 Capitan, New Mexico 88316

Walter Wilson Fire Management Officer (575) 588-7831 Office (575) 588-7333 Fax jose.carrillo@emnrd.nm.gov

(575) 652-1204 Cell pablo.montenegro@emnrd.nm.gov

(575) 376-2204 Office (575) 376-2384 Fax mary.stuever@emnrd.nm.gov

(575) 447-7879 Cell justin.williams@emnrd.nm.gov

(575) 649-8861 Office (575) 838-3026 Cell james.anzalone@emnrd.nm.gov

(575) 517-7365 Cell Andrew.lopez1@emnrd.nm.gov

(505) 425-7472 Office (505) 425-9360 Fax <u>shannon.atencio@emnrd.nm.gov</u>

#### VACANT

(575) 354-2231 Office (575) 354-3052 Fax <u>nick.smokovich@emnrd.nm.gov</u>

(575) 937-0716 Cell walter.wilson@emnrd.nm.gov

2025

## **BERNALILLO DISTRICT (NMS-N6S)**

Lawrence Crane District Forester 5105 Santa Fe Hills Blvd. NE Rio Rancho, New Mexico 87144

Kevin Pacheco Fire Management Officer

Christine Lyons RMP Program Coordinator

## SANTA FE OFFICE (NMS-N9S)

Vernon Muller Resource Protection Bureau Chief 1220 South Saint Francis Drive Santa Fe, New Mexico 87505

Robert Brown State Fire Management Officer

Michael Gonzales State Assistant Fire Management Officer

Directory of New Mexico Interagency Dispatch Centers

| Albuquerque Interagency Dispatch Center<br>Dispatch Center<br>Email | (505) 346-2660<br><u>nmabc@firenet.gov</u> |
|---|--|
| Silver City Interagency Dispatch Center<br>Dispatch Center<br>Email | (575) 538-5371<br><u>nmsdc@firenet.gov</u> |
| Alamogordo Interagency Dispatch Center<br>Dispatch Center<br>Email  | (575) 437-2286<br><u>nmadc@firenet.gov</u> |
| Santa Fe Interagency Dispatch Center<br>Dispatch Center<br>Email    | (505) 438-5600<br><u>nmsfc@firenet.gov</u> |
| Taos Interagency Dispatch Center<br>Dispatch Center<br>Email        | (575) 758-6208<br><u>nmtdc@firenet.gov</u> |

(505) 867-2334 Office (505) 867-2225 Fax <u>lawrence.crane@emnrd.nm.gov</u>

(505) 350-3456 Cell kevin.pacheco@emnrd.nm.gov

(505) 479-2575 Cell Christine.lyons@emnrd.nm.gov

(505) 690-1069 Cell (505) 476-3330 Fax vernonj.muller@emnrd.nm.gov

(505) 660-5705 Cell robert.brown@emnrd.nm.gov

(505) 681-6613 Cell michael.m.gonzales@emnrd.nm.gov

# CHAPTER 7: PARTICPATING ENTITIES

- Albuquerque, City of
- Angel Fire, Village of (Angel Fire-Fire Dept.)
- Bernalillo, Town of
- Bernalillo County Fire and Rescue
- Carlsbad, City of
- Cibola, County of
- Cimarron, Village of
- Cochiti Lake, Town of
- Colfax, County of (Fire Marshal, Emergency Management, Rapid Response, Philmont VFD, Vermejo VFD, and Miami VFD)
- Corrales, Village of
- Cuba, Village of
- Elephant Butte, City of
- Espanola, City of
- Farmington, City of
- Grant, County of (Apache Creek VFD)
- Lincoln, County of
- Incorporated County of Los Alamos
- Maxwell, Village of (Maxwell Fire Dept.)
- McKinley, County of
- Mescalero Fire Department (Otero County)
- Questa, Village of
- Raton, City of (Raton Fire and Emergency Services)
- Red River, Town of (Red River Fire Dept.)
- Rio Communities, City of
- Rio Rancho, City of (DPS)
- Ruidoso, Village of
- San Juan, County of
- Sandoval, County of
- Santa Fe, City of
- Santa Fe County Fire and Rescue
- Sierra County Emergency Services
- Socorro, County of (Midway Hose Company)
- Taos, County of (Latir VFD, Rio Fernando VFD, and Wheeler Peak VFD)
- Taos Ski Valley, Village of
- Valencia, County of

# DIRECTORY OF LOCAL GOVERNMENT WITH RMP AGREEMENT RATE SHEETS

## ALBUQUERQUE FIRE RESCUE, CITY OF

## Local Government – Vendor Name and Address:

Albuquerque, City of 11500 Sunset Gardens SW Albuquerque, NM 87102

**County:** Bernalillo

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

## **NM-RMP Local Government Contact:**

Lieutenant Karina Hernandez, Wildland Coordinator Cell Phone: (505) 452-7406 Office Phone: (505) 768-9319 Email: karinahernandez@cabq.gov

Wildland Duty Officer Cell Phone: (505) 768-9330 Forwarded to duty officers' cell

# Fire Department Contact Information:

Mailing Address: 11500 Sunset Gardens SW Albuquerque, NM 87121

Street Address: Same as Above

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (505) 833-7390 |
| Fire Dept. Office Phone: | (505) 768-9300 |
| Fire Department Fax:     | (505) 768-9345 |

# Fire Department Equipment Resources:

## ANGEL FIRE, VILLAGE OF

#### Local Government – Vendor Name and Address:

Angel Fire, Village of Fire Department P.O. Box 610 Angel Fire, NM 87710

County: Colfax

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

#### **NM-RMP Local Government Contact:**

Jason Vance, Chief Cell Phone: (575) 447-0515 Email: jvance@angelfirenm.gov

Chris Romo, Wildland CoordinatorCell Phone:(575)447-0644Email:cromo@angelfirenm.gov

#### **Fire Department Contact Information:**

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (575) 754-2333 |
| Fire Dept. Office Phone: | (575) 377-3347 |
| Fire Department Fax:     | (575) 377-6098 |

#### Fire Department Radio Frequencies:

Angel Fire TX: 153.965, CG: 136.5; RX: 154.980 Angel Fire TacTX: 154.280, CG None; RX 154.280

#### Fire Department Equipment Resources:

# APACHE CREEK (CATRON COUNTY)

#### Local Government – Vendor Name and Address:

Catron, County of Fiscal Agent 101 Main St, P.O. Box 507 Reserve, NM 87830

#### County: Catron

Forestry Division District: Socorro

**Dispatch:** Silver City Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Charles Pollina, Chief Phone: (520) 403-4295

#### **Fire Department Contact Information:**

| Emergency Phone:       | 911            |
|------------------------|----------------|
| Fire Department Phone: | (575) 533-6423 |
| Dispatch Phone:        | (575) 533-6222 |

#### **Fire Department Equipment Resources**

#### **BERNALILLO, TOWN OF (FIRE RESCUE)**

#### Local Government – Vendor Name and Address:

Bernalillo, Town of 829 Camino Del Pueblo South Bernalillo, NM 87004

County: Sandoval

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque interagency Dispatch Center

## **NM-RMP Local Government Contact:**

Tim Isaacs, Wildland Coordinator Office Phone: (505) 771-7135 Cell Phone: (505) 991-1968

Khalen Howard, Secondary Contact Cell Phone: (505) 697-7401

Chief Michael Legendre Office Phone: (505) 771-7135 Cell Phone: (505) 991-1937

## Fire Department Contact Information:

| Mailing Address:   | 829 Camino Del Pueblo South |
|--------------------|-----------------------------|
| Street Address:    | Bernalillo, NM 87004        |
| Emergency Phone:   | (505) 991-1937              |
| Fire Dept. Office: | (505) 771-7135              |
| Fire Dept. Fax:    | (505) 771-7102              |

#### Fire Department Equipment Resources:

#### **BERNALILLO COUNTY FIRE AND RESCUE**

#### Local Government – Vendor Name and Address:

Bernalillo, County of One Civic Plaza, 10<sup>th</sup> Floor Albuquerque, NM 87102

County: Bernalillo

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

| Joshua Skrondahl, | Wildland Coordinator   |
|-------------------|------------------------|
| Cell Phone:       | (505) 250-7844         |
| Office Phone:     | (505) 468-1364         |
| Email:            | jaskrondahl@bernco.gov |

| Division Chief Danny Valenzuela |                       |  |  |  |  |
|---------------------------------|-----------------------|--|--|--|--|
| Cell Phone:                     | (505) 239-0666        |  |  |  |  |
| Email:                          | dvalenzuel@bernco.gov |  |  |  |  |

#### **Fire Department Contact Information:**

| Mailing Address:  | Bernalillo County<br>415 Silver Ave SW, 8 <sup>th</sup> Floor<br>Albuquerque, NM 87102 |
|---|--|
| Street Address:   | Same as mailing address.   |
| Office Phone:   | (505) 468-1337   |
| Emergency Phone:<br>Dispatch Phone:<br>Fire Dept. Office Phone: | 911<br>(505) 798-7014<br>(505) 468-1310  |

## Fire Department Equipment Resources:

SEE RATE SHEET

#### Comments:

No more than 10 personnel and three equipment resources available in any one dispatch.

## CARLSBAD, CITY OF

#### Local Government – Vendor Name and Address:

Carlsbad Fire Department 401 S. Halagueno Carlsbad, NM 88220

## County: Eddy

#### Forestry Division District: Capitan

**Dispatch:** Alamogordo Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Micah Roberts, RMP Coordinator Cell Phone: (575) 243 - 4355 Office Phone: (575) 689-5923 Email: <u>mdroberts@cityofcarlsbadnm.com</u>

Kenneth Ahrens, Chief Cell Phone: (575)) 302-0664 Office Phone: (575) 885-3125 Email: <u>ksahrens@cityofcarlsbadnm.com</u>

#### **Fire Department Contact Information:**

| Emergency Phone:         | 911                  |
|--------------------------|----------------------|
| Dispatch Phone:          | (575) 885-2111 ext 0 |
| Fire Dept. Office Phone: | (575) 885-3125       |
| Fire Department Fax:     | (575) 885-3124       |

#### Fire Department Equipment Resources:

# CIBOLA, COUNTY OF

#### Local Government – Vendor Name and Address:

Cibola County Fire and Emergency Services 700 E. Roosevelt Ave. Suite 50 (for mailings) 2001 Clif Lear Ave. (Office Location) Grants, NM 87020

County: Cibola

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Dustin Middleton, Emergency Manager/Fire Marshal Cell Phone: (505) 285-7944

Office Phone: (505) 285-2558 Email: <u>dmiddleton@co.cibola.nm.us</u>

## **CIMARRON, VILLAGE OF**

#### Local Government – Vendor Name and Address:

County: Colfax

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

## **NM-RMP Local Government Contact:**

Crisobal Coca, Chief Cell Phone: (575) 643-6226 Office Phone: (575) 376-2271 Email: <u>cristobalcoca10@gmail.com</u>

Daniel Gurule – Wildland Fire Coord. Cell Phone: (575) 447-6270

#### Fire Department Equipment Resources:

## Cochiti Lake, Town of

## Local Government – Vendor Name and Address:

Town Administration 6515A Hoochaneetsa Blvd. Cochiti Lake, NM 87083

County: Sandoval

Forestry Division District: Bernalillo

Dispatch: Albuquerque Interagency Dispatch Center

## **NM-RMP Local Government Contact:**

Andrew Chavez, Chief Cell Phone: (505) 506-9431 Office Phone: (505) 697-0484 Email: <u>fire@cochitilake.org</u>

Dominic Ortiz, Operations Captain Cell Phone: (505) 400-5821

# Fire Department Equipment Resources:

#### **COLFAX, COUNTY OF**

#### Local Government – Vendor Name and Address:

Colfax, County of P.O. BOX 1498 Raton, NM 87740

County: Colfax

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

#### **NM-RMP Local Government Contact:**

Nate Sandoval, Colfax County Fire MarshalCell Phone:(575) 447-1639Office Phone:(575) 445-8931Email:firemarshal@co.colfax.nm.govWebsite:http://www.co.colfax.nm.us/

Philmont VFD - Colfax County District #1James Sanchez, Philmont VFD ChiefCell Phone:(505) 353-2324VFD Phone:(575) 376-2650Email:james.sanchez@scouting.org

Miami VFD - Colfax County District #2 Mike Vigil, Miami VFD Chief Cell Phone: (575) 643-5794 Email: <u>miamifd@co.colfax.nm.us</u>

Vermejo VFD - Colfax County District #7 Jacob Martinez, Vermejo VFD Chief Cell Phone: (575) 781-9201 Office Phone: (575) 445-2059 Email: jacob.martinez@vermejo.com

Colfax County Rapid Response – Colfax County District #8 Lance Alford, VFD Chief Cell Phone: (575) 245-3473 Email: rapidresponse@co.colfax.nm.us

#### Fire Department Radio Frequencies:

Colfax Fire: COLFAXCO 154.4000RX 136.5CG 153.8900TX CG136.5 NARROW Fire Department Equipment Resources: See Rate Sheet

#### CORRALES, VILLAGE OF

#### Local Government – Vendor Name and Address:

Corrales Fire Department 4920 Corrales Rd. Corrales, NM 87048

County: Sandoval

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Anthony Martinez, Chief Cell Phone: (505) 934-3690 Office Phone: (505) 898-7501 Fax: (505) 890-0612 Email: <u>amartinez@corrales-nm.org</u>

Tanya Lattin, Deputy ChiefOffice Phone:(505) 898-7501Cell Phone:(505) 702-4182Email:tlattin@corrales-nm.org

Nicholas Molinari, Deputy Chief Operations Office Phone: (505) 549-7913 Cell Phone: (505) 989-7501

#### **Fire Department Contact Information:**

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (505) 898-7585 |
| Fire Dept. Office Phone: | (505) 898-7501 |
| Fire Department Fax:     | (505) 890-0612 |

#### Fire Department Equipment Resources:

## CUBA, VILLAGE OF

#### Local Government – Vendor Name and Address:

Village of Cuba P.O. Box 426 Cuba, NM 87013

**County:** Sandoval

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Mark P. Young, Wildland CoordinatorCell Phone:(321) 223-6163 (Personal)Email:mpy8675309@gmail.com

#### **Rick Romero, CVFD Chief**

Cell Phone: (505)469-4365

#### **Fire Department Contact Information:**

Emergency Phone: 911 Dispatch Phone: Fire Dept. Office Phone: Fire Department Fax:

#### Fire Department Equipment Resources:

#### **ELEPHANT BUTTE, CITY OF**

#### Local Government – Vendor Name and Address:

Elephant Butte Fire and Rescue P.O. Box 1080 Elephant Butte, NM 87935

County: Sierra

Forestry Division District: Socorro

**Dispatch:** Silver City Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Roger Long, Chief Phone: (575) 636-4542

#### **Fire Department Contact Information:**

| Emergency Phone:       | 911            |
|------------------------|----------------|
| Fire Department Phone: | (575) 740-6192 |
| Dispatch Phone:        | (575) 894-6617 |

#### Fire Department Equipment Resources:

SEE RATE SHEET - CALL FOR AVAILABILITY

#### **ESPANOLA FIRE DEPARTMENT**

#### Local Government – Vendor Name and Address:

Espanola Fire Department P.O. Drawer 37 Espanola, NM 87532

County: Rio Arriba

#### Forestry Division District: Chama

**Dispatch:** Santa Fe Interagency Dispatch Center

#### **NM RMP Local Government Contact:**

Johnny Martinez, Chief Office Phone: (505) 747-6063 Email: johnnymartinez@espanolanm.gov

John Wickersham- Deputy Chief Office Phone: (505) 747-6063 Email: <u>johnwickersham@espanolanm.gov</u>

#### **Fire Department Contact Information:**

| Mailing Address:<br>Street Address: | Same as Above<br>Same as Above |
|-------------------------------------|--------------------------------|
| Emergency Phone:                    | 911                            |
| Dispatch Phone:                     | (505) 753-5555                 |
| Fire Dept. Office Phone:            | (505) 753-0037                 |

(505) 747-6084

## Fire Department Radio Frequencies:

Espanola Fire: TX: 154.2050

#### Fire Department Equipment Resources:

SEE RATE SHEET

Fire Department Fax:

#### FARMINGTON, CITY OF

#### Local Government – Vendor Name and Address

Farmington, City of 301 N. Auburn Farmington, NM 87401

County: San Juan

#### Forestry Division District: Chama

**Dispatch:** Taos Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Jay Walter, Wildland Coordinator Cell Phone:(623) 696-8532 Office Phone: (505) 327-7701

Tom Miller, Assistant Cell Phone: (505) 360-0880

Robert Sterrett, ChiefCell Phone:(505) 320-5852Fire Department:(505) 599-1430

#### **Fire Department Contact Information:**

Mailing Address: 301 N. Auburn Farmington, NM 87401

| Emergency Phone:       | 911            |
|------------------------|----------------|
| Fire Department Phone: | (505) 599-1430 |
| Fire Department Fax:   | (505) 327-6353 |
| Dispatch Phone:        | (505) 334-6000 |

#### Fire Department Equipment Resources:

#### LINCOLN, COUNTY OF

#### Local Government – Vendor Name and Address:

Lincoln, County of 300 Central Ave. Carrizozo, NM 88301

County: Lincoln

Forestry Division District: Capitan

**Dispatch:** Alamogordo Interagency Dispatch Center

#### **NM RMP Local Government Contact:**

Arron Griewahn, Lincoln County Emergency Services DirectorCell Phone:(575) 937- 2824Office:(575) 336-8601Email:agriewahn@lincolncountynm.gov

| Brian Sampson, EM/OES Coordinator |                             |  |
|-----------------------------------|-----------------------------|--|
| Cell:                             | (575) 740-0894              |  |
| Office:                           | (575) 336-8602              |  |
| Email:                            | bsamson@lincolncountynm.gov |  |

Joseph Luna, OES Firefighter/Wildland Coordinator Cell: (575) 740-8963 Office: (575) 336-8603 Email: jluna@lincolncountynm.gov

#### **Fire Department Contact Information:**

| Mailing Address:         | 300 Central Avenue  |
|--------------------------|---------------------|
| -                        | Carrizozo, NM 88301 |
| Street Address:          | Same as Above       |
| Emergency Phone:         | 911                 |
| Fire Dept. Office Phone: |                     |
| Fire Department Fax:     |                     |

#### Fire Department Radio Frequencies:

Lincoln County Tac1: TX: 153.740, CG: 100.0, RX: 153.740 CG: 100.0 Lincoln County Tac2: TX: 153.935, CG: 100.0, RX: 153.935 CG: 100.0 **Fire Department Equipment Resources:** SEE RATE SHEET

#### INCORPORATED COUNTY OF LOS ALAMOS

#### Local Government – Vendor Name and Addresses:

Los Alamos, County of 1000 Central Ave., Suite 300 Los Alamos, NM 87544

County: Los Alamos

Forestry Division District: Bernalillo

**Dispatch:** Santa Fe Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Primary Contact: Kelly Sterna – Wildland Division Chief Cell Phone: (505) 695-6531 Office Phone: (505) 662-8304 Office Fax: (505) 662-8302

Secondary Contact: Captain Van Leimer Cell phone: (505) 695-4353 Email: van.leimer@lacnm.us

#### **Fire Department Contact Information:**

| Mailing Address:            | Street Address:             |
|-----------------------------|-----------------------------|
| 999 Central Ave., Suite 200 | 999 Central Ave., Suite 200 |
| Los Alamos, NM 87544        | Los Alamos, NM 87544        |
|                             |                             |

| 911            |
|----------------|
| (505) 662-8222 |
| (505) 662-8301 |
| (505) 662-8302 |
|                |

#### Fire Department Equipment Resources:

#### MAXWELL, VILLAGE OF

#### Local Government – Vendor Name and Addresses:

Maxwell, Village of P.O. Box 356 Maxwell, NM 87728

County: Colfax

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

#### **NM-RMP Local Government Contact:**

| Shawn Mitchell, VFD Chief |                               |  |
|---------------------------|-------------------------------|--|
| Address:                  | 313 Maxwell Ave               |  |
|                           | Maxwell, NM 87728             |  |
| Contact Phone:            | (575) 447-2925 cell (Primary) |  |
| Fire Department:          | (575) 375-2133                |  |
| Email:                    | shawn.mitchel1@yahoo.com      |  |

#### Fire Department Radio Frequencies:

#### Fire Department Equipment Resources:

#### MCKINLEY, COUNTY OF

#### Local Government – Vendor Name and Addresses:

McKinley, County of 413 Bataan Veteran's St. P.O. Box 1706 Gallup, NM 87305

**County:** McKinley County

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Tim Berry, ChiefWork Phone:(505) 863-3839Cell Phone:(505) 457-5835Email:timothy.berry@co.mckinley.nm.us

Rich Austin, Deputy Chief Work Phone: (505) 863-3839 Cell Phone: (505) 801-0811 Email: Rich.austin@co.mckinley.nm.us

#### **Fire Department Contact Information:**

| Emergency Phone:     | 911            |
|----------------------|----------------|
| Fire Department Fax: | (505) 863-1439 |

#### Fire Department Equipment Resources:

#### MESCALERO APACHE FIRE RESCUE (OTERO COUNTY)

#### Local Government – Vendor Name and Addresses:

Otero, County of Finance 1101 New York Avenue Alamogordo, NM 88310

County: Otero

Forestry Division District: Capitan

**Dispatch:** Alamogordo Interagency Dispatch Center (575) 437-2286

### **NM-RMP Local Government Contact:**

#### Clyde Jenkins, Chief

| Work Phone: | (575) 464-3473                      |
|-------------|-------------------------------------|
| Cell Phone: | (575) 309-5990                      |
| Email:      | wjenkins@mescaleroapachetribe.com   |
| Website:    | http://www.mescaleroapachetribe.com |

#### **Fire Department Contact Information:**

| Mailing Address:  | Mescalero Apache Fire Rescue<br>25220 Hwy # 70; PO Box #13<br>Mescalero, NM 88340 |
|---|---|
| Street Address:   | SAME  |
| Emergency Phone:<br>Station # 1:<br>Fire Department Fax:<br>Cell: | 911<br>(575) 464-3473<br>(575) 464-3474<br>(575) 309-5990                         |

#### Fire Department Equipment Resources:

#### QUESTA, VILLAGE OF

#### Local Government – Vendor Name and Addresses:

Questa, Village of 2500 Old State Road 3 Questa, NM 87556-0000

County: Taos

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

#### **NM-RMP Local Government Contact:**

#### Raynelle Sanchez-Cordova, Assist. Chief

| Work Phone: | (575) 586-0250               |
|-------------|------------------------------|
| Cell Phone: | (575) 997-7297               |
| Email:      | rcordova@villageofquesta.org |

#### **Fire Department Contact Information:**

| Alfredo Romero, VFD Chief<br>Work Phone:<br>Cell Phone: | (575) 586-0250<br>(575) 779-1171          |
|---|---|
| Mailing Address:  | 2463 Highway 522<br>Questa, NM 87556-0000 |
| Street Address:   | SAME                                      |
| Emergency Phone:<br>Fire Dept. Office Phone:            | 911<br>(575) 586-0520                     |

#### Fire Department Equipment Resources:

#### **RATON, CITY OF**

#### Local Government – Vendor Name and Addresses:

Raton, City of P.O. BOX 910 Raton, NM 87740

County: Colfax

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

#### **NM-RMP Local Government Contact:**

#### Anthony Burk, Chief

| Contact Phone: | (575) 445-2708                  |
|----------------|---------------------------------|
| Cell Phone:    | (575) 707-1910                  |
| Email:         | aburk@cityofraton.com           |
| Website:       | http://www.ratonnm.gov/138/Fire |

#### **Fire Department Contact Information:**

| Mailing Address: | Raton, City of<br>P.O. Box 910<br>Raton, NM 87740 |
|------------------|---|
| Street Address:  | 127 Clark Ave<br>Raton, NM 87740                  |

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (575) 445-2704 |
| Fire Dept. Office Phone: | (575) 445-2708 |
| Fire Department Fax:     | (575) 737-2709 |

#### Fire Department Radio Frequencies:

Raton Fire: TX: 158.955 TX TONE: 127.3 RX: 154.025

#### Fire Department Equipment Resources:

#### **RED RIVER, TOWN OF**

#### Local Government – Vendor Name and Address:

Red River, Town of P.O. Box 1020 Red River, NM 87558

County: Taos

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

#### NM RMP Local Government Contact:

#### David "Deke" Willis, Chief

Office Phone:(575) 754-6107Cell Phone:(575) 770-7426Email:dwillis@redriver.orgWebsite:https://redriver.org/town/town-services/fire-department

#### **Fire Department Contact Information:**

| Mailing Address:  | Red River Fire Dept.<br>P.O. Box 1020<br>Red River, NM 87558                      |
|---|---|
| Street Address:   | 100 East Main Street<br>Red River, NM 87558                                       |
| Emergency Phone:<br>Dispatch Phone:<br>Fire Dept. Office Phone:<br>Fire Department Fax: | 911<br>(575) 754-2333 or 754-6166<br>(575) 754-2333 or 754-6166<br>(575) 754-6119 |

#### Fire Department Radio Frequencies:

Red River Fire Dept.: TX: 154.235, CG: None; RX: 154.235

#### Fire Department Equipment Resources:

#### **RIO COMMUNITIES FIRE DEPARTMENT**

#### Local Government – Vendor Name and Addresses:

Rio Communities, City of 360 Rio Communities Blvd Rio Communities, NM 87002-0000

County: Valencia

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

#### **Rob Barr, Wildland Coordinator**

Cell Phone: (505) 620-6045 Office Phone: (505) 864-6161 Office Fax: (505) 861-6804

Second Contact:

#### Andrew Tabet, Fire Chief

Office Phone:(505) 864-6161Cell Phone:(505) 859-1647Office Fax:(505) 861-6804

#### Fire Department Contact Information:

- Mailing Address: 360 Rio Communities Blvd Rio Communities, NM 87002-0000
- Street Address: 360 Rio Communities Blvd Rio Communities, NM 87002-0000

#### **RIO RANCHO, CITY OF**

#### Local Government – Vendor Name and Address:

Rio Rancho, City of 3200 Civic Center Circle N.E. Rio Rancho, NM 87144

**County:** Sandoval

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

#### Adam Archuleta

Wildland Division Coordinator (505) 934-4402 adarchuleta@rrnm.gov

Tyler Carlson Assistant Wildland Division Coordinator/ training director (928) 380-4631 tycarlson@rrnm.gov

Capt. Damian Mainolfa Assistant Wildland Coordinator/Billing Director (505) 610-3964 dmainolfa@<u>rrnm.gov</u>

#### Fire Department Contact Information:

| Mailing Address:  | 1526 Stephanie Rd   |
|---|---|
| Street Address:   | Rio Rancho, NM 87124<br>Same as Above                     |
| Emergency Phone:<br>Dispatch Phone:<br>Fire Dept. Office Phone:<br>Fire Department Fax: | 911<br>(505) 891-7226<br>(505) 891-7226<br>(505) 891-5208 |

#### Fire Department Equipment Resources:

#### **RUIDOSO, VILLAGE OF**

#### Local Government – Vendor Name and Address:

Ruidoso. Village of 313 Cree Meadows Dr. Ruidoso, NM 88346

County: Lincoln

Forestry Division District: Capitan

**Dispatch:** Alamogordo Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

#### Cade Hall, Fire Chief

 Office Number:
 (575) 257-3473

 Cell Phone:
 (575) 973-4053

 Office Fax:
 (575) 257-4550

 Email:
 cadehall@ruidoso-nm.gov

 Website:
 https://www.ruidoso-nm.gov/ruidoso-fire-department

#### Alec Davis, Wildland Coordinator

Office Number:(575) 257-3473Cell Phone:(575) 791-2843Office Fax:(575) 257-4550Email:alecdavis@ruidoso-nm.govWebsite:https://www.ruidoso-nm.gov/ruidoso-fire-department

#### Fire Department Contact Information:

| Mailing Address: | Same as Above      |
|------------------|--------------------|
| Street Address:  | 541 Sudderth Drive |
|                  | Ruidoso, NM 88345  |

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Fire Dept. Office Phone: | (575) 257-3473 |
| Fire Department Fax:     | (575) 257-4550 |

#### Fire Department Radio Frequencies:

#### Fire Department Equipment Resources:

#### SAN JUAN COUNTY FIRE DEPARTMENT

#### Local Government – Vender Name and Address:

San Juan, County of 209 South Oliver Aztec, NM 87410

County: San Juan

Forestry Division District: Chama

**Dispatch**: Interagency Dispatch Center

#### NM RMP-Local Government Contact:

#### David Vega, Chief

 Office Phone:
 (505) 333-3123

 Cell Phone:
 (505) 330-1049

 Email:
 mohlerj@sjcounty.net

John Gilbert, Deputy Chief Office Phone: (505) 334-1180 Cell Phone: (505) 793-5020 Email: <u>vegad@sjcounty.net</u>

Shay Aurnhammer, Wildland Coordinator Office Phone: (505) 333-3123 Cell Phone: (505) 947-3295 Email: <u>shaylee.aurnhammer@sjcounty.net</u>

#### **Fire Department Contact Information:**

- Mailing Address: San Juan County Fire Department 209 South Oliver Aztec, NM 87410
- Dispatch Phone: (505) 334-1951 (505) 334-6622 (505) 334-8109

#### Fire Department Equipment Resources:

#### SANDOVAL COUNTY FIRE DEPARTMENT

#### Local Government – Vendor Name and Address:

Sandoval, County of P.O. Box 40 Bernalillo, NM 87004

**County:** Sandoval

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

#### Ryan Louchard, Wildland Coordinator/Battalion Chief

 Office Phone:
 (505) 867-0245

 Cell Phone:
 (505) 206-6865

 Emergency Contact:
 (505) 891-7226

 Email:
 rlouchard@sandovalcounty.com

Amanda Campos, Assistant Wildland CoordinatorCell Phone:(505) 553-5648Email:acampos@sandovalcountynm.gov

#### Fire Department Contact Information:

| Mailing Address: | P.O. Box 40<br>Bernalillo, NM 87004          |
|------------------|--|
| Street Address:  | 301 Piedra Lisa Road<br>Bernalillo, NM 87004 |

| Emergency Phone:         | (505) 891-7226 |
|--------------------------|----------------|
| Fire Dept. Office Phone: | (505) 867-0245 |
| Fire Department Fax:     | (505) 867-6256 |

#### Fire Department Equipment Resources:

#### SANTA FE, CITY OF

#### Local Government – Vendor Name and Address:

Santa Fe, City of P.O. Box 909 Santa Fe, NM 87504

County: Santa Fe

Forestry Division District: Bernalillo

**Dispatch:** Santa Fe Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

Nathan Miller, Wildland Superintendent/RMP Committee ChairOffice Phone: 505) 955-3901Home Phone: (505) 350-6709Cell Phone: (505) 231-3163Email: nfmiller@santafenm.gov

#### Fire Department Contact Information:

| Mailing Address:   | P.O. Box 909<br>Santa Fe, NM 87504      |
|--|---|
| Street Address:  | 200 Murales Road<br>Santa Fe, NM 87501  |
| Emergency Phone:<br>Fire Dept. Office Phone:<br>Fire Department Fax: | 911<br>(505) 955-3110<br>(505) 955-3115 |

#### Fire Department Equipment Resources:

SEE RATE SHEET

#### Comments:

2025

#### SANTA FE COUNTY FIRE DEPARTMENT

#### Local Government – Vendor Name and Address:

Santa Fe County Fire Department 35 Camino Justicia Santa Fe, NM 87508

County: Santa Fe

Forestry Division District: Bernalillo

**Dispatch:** Santa Fe Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

**Mike Feulner, Captain, Wildland Division** Cell Phone: (505) 231-8845

Wildland Coordinator Cell Phone: (505) 927-6553

#### Fire Department Contact Information:

| Mailing Address: | Same as Above |
|------------------|---------------|
| Street Address:  | Same as Above |

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (505) 428-3730 |
| Fire Dept. Office Phone: | (505) 992-3070 |
| Fire Department Fax:     | (505) 992-3073 |

#### Fire Department Radio Frequencies:

Santa Fe County: TX: 158.970, CG: 156.7; RX: 154.415, CG: 156.7

#### Fire Department Equipment Resources:

#### SEE RATE SHEET

#### Comments:

No more than 10 personnel and three equipment resources available in any one dispatch.

#### SIERRA COUNTY FIRE DEPARTMENT

#### Local Government – Vendor Name and Addresses:

Sierra, County of 1712 Date, Ste. D Truth or Consequences, NM 87901

County: Sierra

Forestry Division District: Socorro

**Dispatch:** Silver City Dispatch Center

#### **NM-RMP Local Government Contact:**

| Primary Contact: |                |
|------------------|----------------|
| Ryan Williams    |                |
| Cell Phone:      | (575) 740-7213 |
| Office Phone:    | (575) 894-6215 |

Secondary Contact: **Travis Atwell** Cell Phone: (575) 740-7704

#### Fire Department Contact Information:

| Mailing Address: | 1712 N. Date, Ste. D           |   |
|------------------|--------------------------------|---|
| -                | Truth or Consequences, NM 8790 | 1 |

Street Address: Same as above

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (575) 894-6617 |
| Fire Dept. Office Phone: | (575) 894-6215 |

#### Fire Department Equipment Resources:

#### SOCORRO COUNTY FIRE DEPARTMENT

#### Local Government – Vendor Name and Addresses:

Socorro, County of 198 Neel Ave Socorro, NM 87801

County: Socorro

Forestry Division District: Socorro

**Dispatch:** Silver City Dispatch Center

#### **NM-RMP Local Government Contact:**

| VACANT        |                |
|---------------|----------------|
| Cell Phone:   |                |
| Office Phone: | (575) 835-2029 |

#### **Fire Department Contact Information:**

| Mailing Address: | 198 Neel Ave |
|------------------|--------------|
| Street Address:  | 198 Neel Ave |

Socorro, NM 87801

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (575) 835-0941 |
| Fire Dept. Office Phone: | (575) 835-2029 |

#### Fire Department Equipment Resources:

SEE RATE SHEET

Midway Hose Company San Antonio FD North County FD

#### TAOS COUNTY FIRE DEPARTMENT

#### Local Government – Vendor Name and Addresses:

Taos, County of 105 Albright St. Suite A Taos, NM 87571

County: Taos

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

#### **NM-RMP Local Government Contact:**

#### Mike Cordova, Taos County- Fire Chief

Contact Phone: (575) 737-6469 cellEmail:mike.cordova@taoscounty.orgWebsite:http://www.taoscounty.org

Garret Hansen, Taos County Wildland Coordinator Contact Phone: (575) 779-0914 cell Email: <u>ensowfs@gmail.com</u>

#### Fire Department Contact Information: Latir Fire District

Jona Olsson-VFD Chief HC 81 Box 644 Questa, NM 87556 Contact Phone: (575) 586-2488 Email: <u>latirfirejona@taosnet.com</u>

#### **Rio Fernando Fire District**

Russell Driskell HC 71 Box 30 Taos, NM 87571 Contact Phone: (575) 751-0552 <u>driskell@taosnet.com</u>

#### Wheeler Peak Fire District

David "Deke" Willis, Wheeler Peak VFD Fire Chief P.O. Box 427 Red River, NM 87558 Contact Phone: (575) 754-6107 Fax Number: (575) 754-6119 Email: <u>dwillis@redriver.org</u>

#### Fire Department Equipment Resources: SEE RATE SHEET

#### TAOS SKI VALLEY, VILLAGE OF

#### Local Government – Vendor Name and Addresses:

Taos Ski Valley, Village of 7 Firehouse Rd P.O. Box 100 Taos Ski Valley, NM 87525

County: Taos

Forestry Division District: Cimarron

**Dispatch:** Taos Interagency Dispatch Center (575) 758-6208

#### **NM-RMP Local Government Contact:**

Robert Molina Jr, ChiefContact Phone: (575) 776-8118Email:fire@vtsv.org

Garret Hanson, Wildland Coordinator Contact Phone: (575) 779-0914 Email: <u>ensowfs@gmail.com</u>

#### Fire Department Contact Information:

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (575) 758-3361 |
| Fire Dept. Office Phone: | (575) 758-3361 |

#### Fire Department Radio Frequencies:

RX/TX:

#### Fire Department Equipment Resources:

#### VALENCIA COUNTY FIRE DEPARTMENT

#### Local Government – Vendor Name and Addresses:

Valencia, County of P.O. Box 1119 Los Lunas, NM 87031

County: Valencia

Forestry Division District: Bernalillo

**Dispatch:** Albuquerque Interagency Dispatch Center

#### **NM-RMP Local Government Contact:**

#### **Robb Barr, Wildland Captain**

| Cell Phone:   | (505) 377-8312 |
|---------------|----------------|
| Office Phone: | (505) 866-2040 |
| Office Fax:   | (505) 866-8749 |

Second Contact:

#### Matthew Propp, Fire Chief

| Office Phone: | (505) 866-2040 |
|---------------|----------------|
| Cell Phone:   | (505) 573-1704 |
| Office Fax:   | (505) 866-8749 |

#### **Fire Department Contact Information:**

| Mailing Address:<br>Street Address: | P.O. Box 1119<br>Los Lunas, NM 87031 |
|-------------------------------------|--------------------------------------|
| Street Address:                     | 444 Luna Ave.<br>Los Lunas, NM 87031 |
| Emergency Phone                     | 911                                  |

| Emergency Phone:         | 911            |
|--------------------------|----------------|
| Dispatch Phone:          | (505) 865-9130 |
| Fire Dept. Office Phone: | (505) 866-2040 |
| Fire Department Fax:     | (505) 866-8749 |
|                          |                |

#### Fire Department Equipment Resources:

# **APPENDICES**

Appendix A: EMNRD, Forestry Division Districts

**Appendix B:** Map of New Mexico Interagency Dispatch Zones

Appendix C: New Mexico Eligibility Requirements for Engine Boss Crosswalk

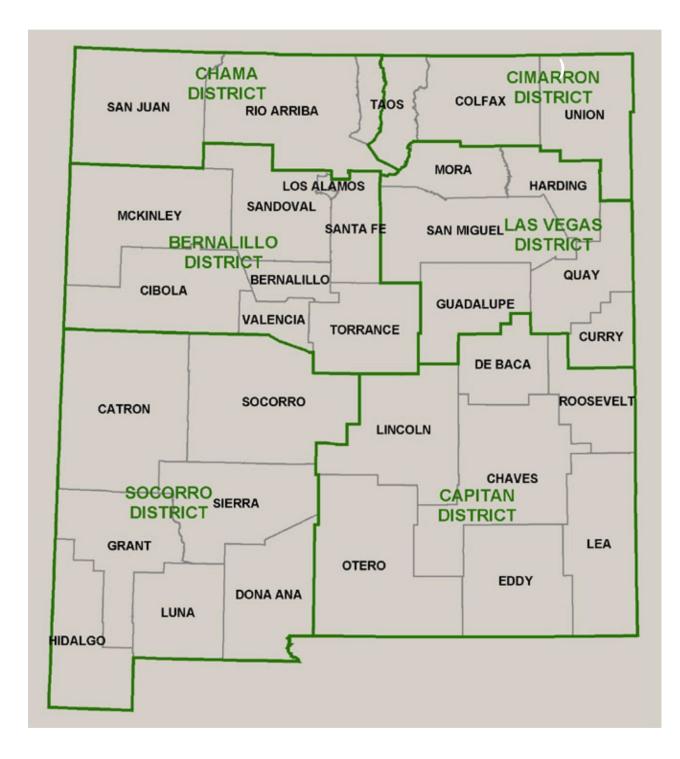
Appendix D: Normal Unit Stocking (NUS) Equipment List

Appendix E: Administrative Forms

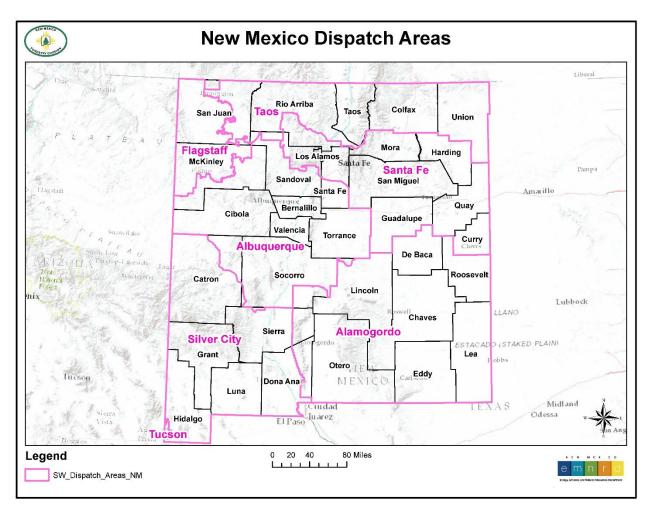
Appendix F: Fire Department Incident Management Team Application Request Form

# **GLOSSARY OF TERMINOLOGY**

# APPENDIX A: EMNRD, FORESTRY DIVISION DISTRICTS



# APPENDIX B: MAP OF NEW MEXICO INTERAGENCY DISPATCH ZONES



| APPENDIX C: NEW MEXICO ELIGIBILITY REQUIREMENTS FOR ENGINE BOSS |      | NEW MEXICO ELIGIBILITY REQUIREMENTS FOR ENGINE BOSS |   |
|---|------|---|---|
| CROS  | SWAL | <u>&lt;</u>   |   |
|   | YES  | NO  |   |
| 1.  |      |   | Certificates for S-130/190 Including field day*, I-100, L-180, S-131, S-133 (*<br>if no field day a NWCG Firefighter 2 FFT2 task book will substitute).   |
| 2.  |      |   | Completed NWCG Firefighter 1 FFT1 task book, with evaluations.  |
| 3.  |      |   | Certificate for Fire Officer I (NFPA 1020 compliant) (IFSAC or equivalent)  |
| 4.  |      |   | Candidate shows requisite knowledge on human resource management (supervision, evaluation, stress management, and interpersonal relationships).   |
| 5.  |      |   | Candidate shows requisite knowledge on verbal and written communications under emergency, non-emergency, and training situations.   |
| 6.  |      |   | Candidate shows requisite knowledge of basic workplace safety policies and procedures and accident investigations as well as preventative and wellness programs.  |
| 7.  |      |   | Candidate must have written confirmation from a chief officer within their fire department affirming the following: years with the department, average number of incidents individual responds to a year, fire officer positions held ( <i>i.e.</i> driver/operator/engineer or company officer), and a recommendation that the individual is at a level capable of beginning an engine boss gap course curriculum. |

-If all the above are yes candidate is ready to begin gap courses for Engine Boss. -If one and two above are yes and three is no, see below for additional requirements. -If either one or two are no, candidate must complete that requirement before being certified.

Candidates wishing to show requisite knowledge in four through six above need to show documentation (certificates) of courses taken /or give a written explanation as to how they have gained such experiences "On the Job". The Crosswalk committee will then evaluate each individual and as a group decide if the individual meets the intent of NFPA 1021 and can then begin the gap courses for engine boss.

# APPENDIX D: NORMAL UNIT STOCKING (NUS) EQUIPMENT LIST

| Category              | Item Description                      | NFES #  | Туре    | Туре |  |
|-----------------------|---------------------------------------|---------|---------|------|--|
| Category              |                                       | INFES # | 3, 4, & | 56   |  |
|                       | McLeod                                | 0296    | 1       |      |  |
|                       | Combination Tool                      | 1180    | 1       | 1    |  |
|                       | Shovel                                | 0171    | 3       | 2    |  |
|                       | Pulaski                               | 0146    | 3       | 2    |  |
| -·                    | Backpack Pump                         | 1149    | 3       | 2    |  |
| Fire Tools<br>& Equip | Fusees (case)                         | 0105    | 1       | 1/2  |  |
|                       | Foam, concentrate, Class A (5-gallon) | 1145    | 1       | 1    |  |
|                       | Chainsaw (and chaps)                  |         | 1       | 1    |  |
|                       | Chainsaw Tool Kit                     | 0342    | 1       | 1    |  |
|                       | Drip Torch                            | 0241    | 2       | 1    |  |
|                       | Portable Pump                         |         | *       | *    |  |
|                       | First Aid Kit, 10-person              | 1143    | 1       | 1    |  |
| Medical               | Burn Kit                              |         | 1       | 1    |  |
|                       | Body Fluids Barrier Kit               | 0640    | 1       | 1    |  |
|                       | Flashlight, general service           | 0069    | 1       | 1    |  |
|                       | Chock Blocks                          |         | 1       | 1    |  |
|                       | Tow Chain or Cable                    | 1856    | 1       | 1    |  |
|                       | Jack, hydraulic (comply w/GVW)        |         | 1       | 1    |  |
|                       | Lug Wrench                            |         | 1       | 1    |  |
|                       | Pliers, fence                         |         | 1       | 1    |  |
|                       | Food (48-hour supply)                 | 1842    | 1       | 1    |  |
| 0                     | Rags                                  | 3309    | *       | *    |  |
| General<br>Supplies   | Rope/Cord (feet)                      |         | 50      | 50   |  |
| Cupplico              | Sheeting, plastic, 10' x 20'          | 1287    | 1       | 1    |  |
|                       | Tape, duct                            | 0071    | 1       | 1    |  |
|                       | Tape, filament (roll)                 | 0222    | 2       | 2    |  |
|                       | Water (gallon/person) minimum         |         | 2       | 2    |  |
|                       | Bolt Cutters                          |         | 1       | 1    |  |
|                       | Toilet Paper (roll)                   | 0142    | *       | *    |  |
|                       | Cooler or Ice Chest                   | 0557    | *       | *    |  |
|                       | Hand Primer, Mark III                 | 0145    | *       | *    |  |

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

| Category Item Description | NFES #            | Туре   |           |   |
|---------------------------|-------------------|--------|-----------|---|
|                           | nem Description   | INFES# | 3, 4, & 5 | 6 |
|                           | Hose Clamp        | 0046   | 2         | 1 |
|                           | Gaskets (set)     |        | 1         | 1 |
|                           | Pail, collapsible | 0141   | 1         | 1 |
|                           | Hose Reel Crank   |        | *         | * |

|           | Fire Extinguisher (5 lb.)                          | 2143 | 1 | 1 |
|-----------|--|------|---|---|
|           | Flagging, Pink (roll)                              | 0566 | * | * |
| Safety    | Flagging, Yellow w/Black Stripes (roll)            | 0267 | * | * |
| Salety    | Fuel Safety Can (Type 2 OSHA, metal, 5-<br>gallon) | 1291 | * | * |
|           | Reflector Set                                      |      | * | * |
|           | General Took Kit (5180-00-177-7033/GSA)            |      | 1 | 1 |
|           | Oil, automotive, quart                             |      | 4 | 2 |
|           | Oil, penetrating, can                              |      | 1 | 1 |
|           | Oil, automatic transmission, quart                 |      | 1 | 1 |
|           | Brake Fluid, pint                                  |      | 1 | 1 |
|           | Filter, gas  |      | 1 | 1 |
| Vehicle & | Fan Belts  |      | 1 | 1 |
| Pump      | Spark Plugs  |      | 1 | 1 |
| Support   | Hose, air compressor w/adapters                    |      | 1 | 0 |
|           | Fuses (set)  |      | 1 | 1 |
|           | Tire Pressure Gauge                                |      | 1 | 1 |
|           | Jumper Cables                                      |      | 1 | 1 |
|           | Battery Terminal Cleaner                           |      | * | * |
|           | Tape, electrical, plastic                          | 0619 | 1 | 1 |
|           | Tape, Teflon                                       |      | 1 | 1 |
|           | File, mill, bastard                                | 0060 | * | * |
|           | Head Lamp  | 0713 | 1 | 1 |
| Personal  | Hard Hat   | 0109 | 1 | 1 |
| Gear      | Goggles  | 1024 | 2 | 2 |
| (Extra    | Gloves   |      | * | * |
| Supply)   | First Aid Kit, individual                          | 0067 | 1 | 1 |
|           | Fire Shirt   |      | * | * |
|           | Fire Shelter w/case & liner                        | 0169 | 2 | 1 |

2025

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

|           | Packsack   | 0744 | 2   | 1   |
|-----------|--|------|-----|-----|
|           | Batteries, headlamp (pkg)                                    | 0030 | 6   | 4   |
|           | Ear Plugs (pair)   | 1027 | 3   | 3   |
|           | Portable   |      | 1   | 1   |
| Radio     | Mobile   |      | 1   | 1   |
|           | Batteries (for portable radio)                               |      | 2   | 2   |
|           | Booster (feet/reel)  | 1220 | 100 | 100 |
|           | Suction (length, 8' or 10')                                  |      | 2   | 2   |
|           | 1" NPSH (feet)   | 0966 | 300 | 300 |
| Hose      | 11/2" NH (feet)  | 0967 | 300 | 300 |
|           | ³∕₄" NH, garden (feet)                                       | 1016 | 300 | 300 |
|           | 1 <sup>1</sup> / <sub>2</sub> " NH, engine protection (feet) |      | 20  | 20  |
|           | 1 <sup>1</sup> / <sub>2</sub> " NH, refill (feet)            |      | 15  | 15  |
|           | Forester, 1" NPSH  | 0024 | 3   | 2   |
|           | Adjustable, 1" NPSH  | 0138 | 4   | 2   |
|           | Adjustable, 1½" NH   | 0137 | 5   | 3   |
|           | Adjustable, ¾ NH   | 0136 | 4   | 2   |
| Nozzle    | Foam, ¾" NH  | 0627 | 1   | 1   |
| NUZZIE    | Foam, 1½" NH   | 0628 | 1   | 1   |
|           | Mopup Wand   | 0720 | 2   | 1   |
|           | Tip, Mopup Wand  | 0735 | 4   | 2   |
|           | Tip, Forester, Nozzle, fog                                   | 0903 | *   | *   |
|           | Tip, Forester Nozzle, straight stream                        | 0638 | *   | *   |
|           | 1" NPSH, Two-Way, Gated                                      | 0259 | 2   | 1   |
| Wye       | 1½" NH, Two-Way, Gated                                       | 0231 | 4   | 2   |
|           | ¾" NH w/Ball Valve, Gated                                    | 0739 | 6   | 4   |
|           | 1" NPSH-F to 1" HN-M   | 0003 | *   | *   |
| Adamtan   | 1" NH-F to 1" NPSH-M   | 0004 | 1   | 1   |
| Adapter   | 11/2" NPSH-F to 11/2" NH-M                                   | 0007 | 1   | 1   |
|           | 11/2" NH-F to 11/2" NPSH-M                                   | 0006 | *   | *   |
|           | <sup>3</sup> ⁄ <sub>4</sub> " NH-F to 1" NPSH-M              | 2235 | 1   | 1   |
| Increaser | 1" NPSH-F to 11/2" NH-M                                      | 0416 | 2   | 1   |
|           | 1" NPSH, Double Female                                       | 0710 | 1   | 1   |
| Coupling  | 1" NPSH, Double Male   | 0916 | 1   | 1   |
| . 0       | 1 <sup>1</sup> / <sub>2</sub> " NH, Double Female            | 0857 | 2   | 2   |

|           | 1 <sup>1</sup> / <sub>2</sub> " NH, Double Male                        | 0856         | 1      | 1 |
|-----------|--|--------------|--------|---|
|           | 1" NPSH-F to ¾" NH-M   | 0733         | 3      | 3 |
| Reducer/  | 1 <sup>1</sup> / <sub>2</sub> " NH-F to 1 NPSH-M                       | 0010         | 6      | 4 |
| Adapter   | 2" NPSH-F to 11/2" NH-M  | 0417         | *      | * |
|           | 21⁄2" NPSH-F to 11⁄2" NH-M   | 2229         | *      | * |
| Deducer   | 11/2" NH-F to 1" NH-M  | 0009         | 1      | 1 |
| Reducer   | 21⁄2" NH-F to 11⁄2" NH-M   | 2230         | 1      | 1 |
| -         | 1" NPSH-F x 1" NPSH-M x 1" NPSH-M,<br>w/cap                            | 2240         | 2      | 2 |
| Тее       | 1½" NH-F x 1½" NH-M x 1" NPSH-M w/cap                                  | 0731         | 2      | 2 |
|           | 11/2" NH-F x 11/2" NH-M x 1" NPSH-M w/valve                            | 0230         | 2      | 2 |
|           | 1 <sup>1</sup> / <sub>2</sub> " NH-F, Automatic Check and Bleeder      | 0228         | 1      | 1 |
|           | ¾" NH, Shut Off  | 0738         | 5      | 5 |
| Valve     | 1" Shut Off  | 1201         | 1      | 1 |
|           | 1 <sup>1</sup> / <sub>2</sub> " Shut Off                               | 1207         | 1      | 1 |
|           | Foot, w/strainer   |              | 1      | 1 |
| Injector  | 1" NPSH x 1/12" NH, Jet Refill   | 7429         | *      | * |
|           | Hydrant, adjustable, 8"  | 0688         | 1      | 1 |
|           | Spanner, 5", 1" to 1½" hose size                                       | 0234         | 4      | 1 |
| Wrench    | Spanner, 11", $1\frac{1}{2}$ " to $2\frac{1}{2}$ " hose size           | 0235         | 2      | 2 |
|           | Pipe, 14"  | 0934         | 1      | 1 |
|           | Pipe, 20"  |              | 1      | 1 |
|           | Fireline Handbook  | 0065         | 1      | 1 |
|           | GPS Unit   |              | 1      | 1 |
|           | Belt Weather Kit   | 1050         | 1      | 1 |
| Engine    | Binoculars   |              | 1      | 1 |
| Ligino    | Map Case w/maps  |              | 1      | 1 |
|           | Inventory List   |              | 1      | 1 |
|           | Current Interagency Standards for Fire and<br>Fire Aviation Operations |              | 1      | 1 |
| *No minim | ums – carried by engines as an option, within w                        | eight limita | ations |   |

# APPENDIX E: ADMINISTRATIVE FORMS

Vehicle/Heavy Equipment Inspection Checklist: USDA/USDI Form OF-296

Reimbursement/Time Forms:

- EMNRD-Personnel Fire Time Report, or
- USDA-Crew Time Report, or
- USDA/USDI-Emergency Firefighter Time Report (OF-288)
- EMNRD-Equipment Fire Time Report, or
- Resource Mobilization Rate Sheet (engine, water tender, fuel tender, ambulance, etc.)
- RMP Reimbursement form for Equipment and Personnel, Updated Forms for 2022
- Extended Work Shift Document Form
- Workers' Compensation Guidelines

# State of New Mexico - Uniform Accident Report - used for auto accidents https://nmtrafficrecords.com/resources/new-mexico-uniform-crash-report/

|                                 | CRAS<br>INVESTIGA<br>SH 100<br>Rev July 2 | 1018 -          |                              |                         |                              |                         |          |                           |                |                |                                | REPORT       |                    |                       | ENT                         |            |                   |                      |   |                    |            |   |            |                     | JNIFO           | RM CR     | ASH RE               |                     |
|---------------------------------|---|-----------------|------------------------------|-------------------------|------------------------------|-------------------------|----------|---------------------------|----------------|----------------|--------------------------------|--------------|--------------------|-----------------------|-----------------------------|------------|-------------------|----------------------|---|--------------------|------------|---|------------|---------------------|-----------------|-----------|----------------------|---------------------|
|                                 | NMDOTU<br>E July 20                       | <sup>18</sup> C |                              | vt Prope                |                              | FATAL                   | 1000     |                           | 00             | UNI            | DER \$                         | 500          | Hit-ar             | nd-Run                | hisaethi Imu                | olved      | Case              | e Nun                | nber:   |                    |            |   |            | #                   |                 |           |                      |                     |
| CR                              | ASH DATE                                  | (MM/DD/Y)       |                              | ndary Ci<br>MILITAR     |                              |                         | Y        | 10                        | NLY            | \$50           | 0 OR M                         | MORE         | Com                | nercial               | ndirectly In<br>Vehicle Inv | rolved     | Age               | ncy C                | ode:  | cou                | NTY        |   | 0          | CAD NU              | ım:             |           |                      |                     |
| Sur                             |   | W Th            | F Sat                        | OCCUR                   |                              |                         |          |                           |                | Adde           | 100)                           |              |                    |                       |                             |            | AT INC            | TED OF               | CTION   | IAUTH              |            |   |            |                     |                 |           |                      |                     |
|                                 |   |                 |                              |                         |                              |                         |          |                           |                | , Addit        | (55)                           |              |                    |                       |                             |            |                   |                      |   |                    |            |   |            |                     |                 |           |                      |                     |
| LC                              | OTHER                                     |                 | FEE"                         |                         |                              | ws<br>D                 |          | SW E                      |                |                |                                |              |                    |                       | ANENT LA                    | NDMAR      |                   |                      |   |                    |            | DN  |            | LA                  |                 |           |                      |                     |
| CR                              | ASH                                       | On Ro           | adway                        | U Wo                    | rk Zone-                     | Constru<br>Mainten      | ction    |                           | AL LA          |                | FI<br>HARN                     |              | Collisi<br>Collisi | ion w/Mo<br>ion w/Per | tor Vehicle<br>rson         |            | Ε                 | Collisio<br>Collisio | n w/Anim<br>n w/Fixed<br>Ilision<br>n w/Other<br>Specify in             | al<br>Object       |            |   | ANAL       | YSIS<br>ODE:        |                 |           |                      | -                   |
| oc                              | CURRED                                    | Off Ro          | adway<br>rafficway           |                         | rk Zone-                     |                         |          | Ye                        | s I            | No             | E۷                             | (ENT<br>FHE) |                    |                       |                             |            |                   | Non-Co<br>Collisio   | Illision<br>n w/Other<br>Stearify in                                    | Non-Fi             | xed Ob     | ject                                      | LOCA       | TION<br>FHE:        |                 |           |                      |                     |
|                                 | VEHICLE                                   |                 | MV                           | Unit Type               |                              |                         |          |                           |                | E W            | On                             | 0.0          |                    |                       |                             |            |                   | 1                    | eft Scer  | ne of C            | rash<br>No | Po  | osted (    | 1.501.001.0         | Τ               | Sa        | ife Spee             | d                   |
|                                 |   | ull Name (La    |                              | Middle)                 |                              | ו ם נ                   |          | נטן נ                     |                |                | Ad                             | Idress       |                    |                       |                             |            |                   |                      | L Tes   |                    | INO        |   |            |                     | _               |           |                      |                     |
|                                 | Driver's Li                               | cense Numi      | ber                          |                         | State                        | Type CE                 |          | atus F                    | lestric        | tions          | Endors                         | sements      | Expire             | 98                    | Interlock                   | City/Sta   | ite               |                      |   |                    | Z          | IP Cod                                    | le         |                     | Pho             | ne        |                      |                     |
|                                 | Date of Bi                                | rth - MM/DE     | mm                           |                         |                              |                         | 1        |                           | Occu           | pation         |                                |              | Incide             | ant Resp              | ion der.                    |            | Se                | at Pos               | 0.00  | Sex                | Race       | Injury                                    | OP<br>Code | OP Used             | Airbag          | Finand    | EMS #                | Med Trans           |
|                                 |   |                 | -2112 011                    |                         |                              |                         |          |                           |                |                |                                |              |                    |                       | 2404041                     |            |                   |                      | Age   | Sex<br>(MF)        | Halbe      | Code                                      | Code       | OP Used<br>Property | Depky           | Ejected   | EMS #                | Med Trans           |
| ants:                           | Seat Pos                                  | 0               | ccupant                      | 's Name                 | (Last,                       | First, M                | iddle)   |                           |                |                | C                              | )ccupan      | t's Addr           | ess (Ci               | ty, State, 2                | ZIP)       |                   |                      | -   | -                  | -          |   | -          | -                   |                 | -         |                      |                     |
| of Occupants                    | -   |                 |                              |                         |                              |                         |          |                           | -              |                |                                |              |                    |                       |                             |            |                   |                      |   |                    |            |   | +          |                     |                 | 1         |                      |                     |
| o Jo .                          |   |                 |                              |                         |                              |                         |          |                           |                |                |                                |              |                    |                       |                             |            |                   |                      |   |                    |            |   |            |                     |                 |           |                      |                     |
| Number                          | Vehide Yr                                 | . Vehicle N     | lake                         | Nodel                   | Colo                         | r Bod                   | ly Style | Carg                      | o Body         | Туре           | Jehicle I                      | Use (1)      | /ehicle U          | se (2)                | Vehide Use                  | (3) To     | wed?              |                      | Damage  |                    |            |   |            |                     |                 |           |                      | L                   |
| ž                               | License                                   | Yr. State       |                              | License                 | e Plate I                    | Number                  | a la     | VIN                       |                |                |                                |              |                    |                       |                             |            | Yes 🗖             | No                   | Hea   | ivy<br>lerate      |            | nt<br>Disable<br>Tunctio<br>Ainor<br>None | ed         | <b>D</b> 12(        | <u> </u>        | 3 4       |                      |                     |
| 5                               |   |                 |                              |                         |                              |                         |          |                           |                |                |                                |              |                    |                       |                             | disa       | wed due<br>abling | e to                 |   | nt<br>ie<br>nown   | H          | Ainor<br>Vone                             | Jiai       | - 112               | 1 10            | 9 8       |                      |                     |
| le No.                          | USDOT#                                    |                 |                              | Type<br>Code            |                              | Towe<br>By              | 01/5     |                           |                |                | - 1                            | Towed T      | 0                  |                       |                             | dan<br>D   | nage?<br>Yes 🕻    | No                   | Severity<br>Hea<br>Moo<br>Silg<br>Nor<br>All /<br>Pro                   | perty              | _          |   |            |                     | 20<br>%         | 멳         | ndercarr             | iage                |
| Vehicle                         | Number<br>of Axles                        | Ve              | hicle We<br>10,000<br>orless | ight Ratir<br>Ibs. 🗖    | 10/Gross<br>10,001<br>to 26, | Combin<br>1bs<br>2001bs |          | Neight<br>Greate<br>26,00 | Rating<br>than | HazMa<br>(carg | t Placar<br>io only)<br>INo DN | d Haz        | mat Pla            | card 4                | digit #                     | OF         | R Ha:             | zmat N               | lame  |                    | 1          | AND                                       |            | 1 digi              | 1#              | Haz (Y    | mat Rele<br>Cargo or | ased?<br>ily)<br>No |
| 2                               | Carrier's                                 | Name            |                              |                         |                              |                         |          |                           |                |                |                                | Carrier      | s Addre            | ss (Stre              | eet/PO Box                  | x, City, i | State)            |                      |   |                    |            |   |            |                     | Car             | rier's Z  |                      |                     |
|                                 | Owner's                                   | Name            |                              |                         |                              |                         | Owne     | er's Co                   | mpan           | y Name         | ·                              | Owr          | ier's Ad           | dress (               | Street/PO                   | Box, Cit   | ty, Stat          | e)                   |   |                    |            | Own                                       | ier's Zl   | P                   | Ow              | ner's Te  | elephone             |                     |
|                                 | Insured B                                 | By: (Name       | of Comp                      | pany)                   | Policy                       | Numbe                   | er       |                           |                |                |                                |              |                    |                       | or Towed                    | Туре       | Ye                | ear                  | Ma  | ke                 | Lice       | nse Y                                     | r. Lic     | ense St             | ate Li          | cense M   | lumber               |                     |
|                                 | Trailer or                                | ehicles (2)     | Туре                         | Year                    | Make                         | Li                      | cense    | Yr. Li                    | cense          | State          | Licens                         | e Numb       | er T               | railer c              | hicles (1)<br>x Towed       | Туре       | Y.e               | ear                  | Ma  | ke                 | Lice       | nse Y                                     | r. Lic     | ense St             | ate Li          | cense N   | lumber               |                     |
|                                 | VEHICLE                                   |                 | MV                           | Unit Type               | •   •                        |                         | w        | S SE                      | sw             | EW             | On                             | 2            |                    | Veh                   | nicles (3)                  |            |                   | 1                    | eft Scei  | ne of C            | Frash      | P   | osted S    | Speed               |                 | Sa        | ife Spee             | d                   |
|                                 | HEADED<br>Driver's F                      |                 | ast, First,                  | Middle)                 | E                            |                         |          | םנ                        |                |                | 0                              | Idress       |                    |                       |                             |            |                   |                      | Yes   | E                  | No         |   |            |                     |                 |           |                      |                     |
| Its:                            | Driver's Li                               | cense Num       | her                          |                         | State                        | Type CE                 | าประ     | atus F                    | lestric        | tione          | Endors                         | sements      | Expire             |                       | Interlock                   | City/Sta   | **                |                      |   |                    | 7          | IP Cod                                    |            |                     | Pho             |           |                      |                     |
| Occupants                       |   |                 |                              |                         |                              | L                       | 0.01     | atuo                      |                |                | LINGUIS                        | somones      |                    |                       |                             | Cityrota   |                   |                      |   |                    |            | 11 000                                    |            |                     |                 |           |                      |                     |
| of                              | Date of B                                 | rth - MM/DE     | 200000                       |                         |                              |                         |          |                           | Occu           | pation         |                                |              | Incide             | ent Resp              | onder                       |            | Se                | at Pos               | Age   | Sex<br>(WF)        | Race       | Injury<br>Code                            | OP<br>Code | OP Used<br>Properly | Airbag<br>Depky | Ejected   | EMS #                | Med Trans           |
| Number                          | Seat Pos                                  | . 0             | ccupant                      | 's Name                 | (Last,                       | First, M                | iddle)   |                           |                |                | C                              | ccupan)      | l's Addr           | ess (Ci               | ty, State, 2                | ZIP)       |                   |                      |   |                    |            |   |            |                     |                 |           |                      |                     |
|                                 | <u> </u>                                  |                 |                              |                         |                              |                         |          |                           |                |                |                                |              |                    |                       |                             |            |                   |                      |   | $\vdash$           |            |   | -          | -                   | $\vdash$        | -         |                      |                     |
| ORISI                           |   |                 |                              |                         |                              |                         |          |                           |                |                |                                |              |                    |                       |                             |            |                   |                      |   |                    |            |   |            |                     |                 |           |                      |                     |
| PEDESTRIAN - OTHER NON-MOTORIST | Vehide Yr                                 | Vehicle M       | ake                          | Model                   | Cob                          | c D-4                   | ly Style | Case                      | o Body         | Tube D         | (ahjola                        | lise (n. Li  | /ebicla !!         | sé (2) 1)             | Vehicle Use                 | (3) -      | wed?              |                      | Damage  |                    |            |   |            |                     |                 |           |                      |                     |
| NON                             |   |                 |                              | 100-001                 |                              |                         | 6 A      |                           | . <i>Cony</i>  | .78.0          |                                |              | . Aniste O         | -* (6)                |                             | 0.0        | ved 7<br>Yes 🗖    | No                   | Damago<br>Severity<br>Hea<br>Moo<br>Slig<br>Unk<br>All /<br>Pro<br>Fire | /<br>Ivy<br>Terate | Exte       | nt<br>Disable                             | əd         | 1.15                | er i            | <u>,</u>  |                      |                     |
| THER                            | License                                   | Yr. State       |                              | License                 | e Plate I                    | Number                  |          | VIN                       |                |                |                                |              |                    |                       |                             | Tow        | wed due<br>abling | e to                 | Bill  | ht<br>IO<br>DOWD   |            | n<br>Disable<br>Functio<br>Ainor<br>None  | onal       | <b>D</b> 12 (       | 4               |           | <b>)</b> , D         |                     |
| 0 - N                           | USDOT#                                    | State           | #                            | Carrier<br>Type<br>Code |                              | Towe<br>By              | ed       |                           |                |                |                                | Towed T      | 0                  |                       |                             |            | nage?<br>Yes 🕻    | No                   |   | Areas              |            | 4011B                                     |            |                     |                 |           | indercarr            | iage                |
| STRIA                           | Number<br>of Axles                        | Ve              | hicle We<br>10,000           | ight Ratir<br>Ibs.      | 10/Gross<br>10,001<br>to 26, | Combin<br>Ibs           | ation 1  | Neight<br>Greate<br>26,00 | Rating         | HazMa<br>(carg | t Placar<br>io only)<br>The DN | d Haz        | mat Pla            | card 4                | digit #                     | OF         |                   | zmat N               | lame  |                    | 3          | AND                                       |            | 1 digi              |                 | Haz       | mat Rele<br>Cardo or | ased?<br>ily)       |
| PEDE                            | Carrier's                                 |                 | orless                       |                         | to 26,                       | JUUIDS.                 |          | 25,00                     | J IDS.         | Intes l        | uno EN                         |              | s Addre            | ss (Stre              | eet/PO Boo                  | x, City,   | State)            |                      |   |                    |            |   |            | -                   | Car             | Tier's Z  |                      | No                  |
| 2 or l                          | Owner's                                   | Name            |                              |                         |                              | 1                       | Owne     | er's Co                   | mpan           | y Name         |                                | Owr          | ier's Ad           | dress (               | Street/PO                   | Box, Cit   | ty, Stat          | e)                   |   |                    |            | Own                                       | ier's Zl   | P                   | Ow              | n er's Te | elephone             |                     |
| No.                             | Insured 8                                 | By: (Name       | of Comp                      | pany)                   | Policy                       | Numbe                   | ər       |                           |                |                |                                |              |                    | Trailer               | or Towed                    | Туре       | Ye                | ar                   | Ma  | ke                 | Lice       | nse Y                                     | r. Lio     | ense St             | ate Li          | cense h   | lumber               |                     |
| Vehicle I                       | Trailer or                                |                 | Туре                         | Year                    | Make                         | По                      | cense    | Yr, Li                    | oense          | State I        | Licens                         | e Numb       |                    | Ve                    | hicles (1)<br>or Towed      | Туре       | Ye                | ar                   | Ma  | ke                 | Lice       | nse Y                                     | r. Lie     | ense St             | ate Li          | cense h   | lumber               |                     |
| J.                              | Towed v                                   | ehicles (2)     |                              |                         |                              |                         |          |                           |                |                |                                |              |                    | Veh                   | nicles (3)                  |            | 10000             | 0.85                 |   |                    |            |   |            |                     |                 |           | CARD DOM:SD          |                     |
|                                 |   | umber X         | ххх                          |                         | (X)                          | XX                      | X        |                           | ST             | ATE            | : OF                           | NE           |                    |                       | CO UI<br>tatute             |            |                   |                      | ASI   | 1 RE               | =PC        | RT  | 2          |                     | HEET            |           | 1                    |                     |
| C                               | ase Numb                                  | er              |                              | #                       |                              |                         |          |                           |                |                |                                |              |                    |                       | - acuto                     |            |                   |                      |   |                    |            |   |            | O                   |                 | 3         | SHEE                 | :15                 |

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

# Can be used for any claim **except WORKERS' COMPENSATION NOTICE OF INCIDENT – STATE OF NEW MEXICO** (Fill out this form in detail.) *Please print or type*.

|                                   | 122  | als & Natural Resource<br>0 South St. Francis Dr.<br>Santa Fe NM 87505 | where the states of the second | L          | ocation Code: |  |
|-----------------------------------|--|--|--------------------------------|------------|---------------|--|
| nt &                              | Dept./Div  |  | Div. Ad                        | dress:     |               |  |
| Time, Date &<br>Place of Incident | Div. Contact Person:                               |  |                                | Phone No.: |               |  |
| Da                                | Employee Involved:                                 |  |                                | Phone No.: | <u>.</u>      |  |
| ne,<br>of                         | Date:  | Time:  | A.M.                           |            | P.M.          |  |
| Tir                               | Location of Incident:                              |  |                                |            |               |  |
| Pla                               |  |  |                                |            |               |  |
|                                   | Full Name:   |  |                                |            | Age:          |  |
|                                   | Address:   |  |                                |            | Phone No.:    |  |
|                                   |  |  |                                |            | _             |  |
|                                   | Employed b<br>Injuries:<br>Treated by:<br>Address: | ру:  |                                |            |               |  |
|                                   | Injuries:  |  |                                |            |               |  |
|                                   | Treated by:  |  |                                |            |               |  |
|                                   | Address:   |  |                                |            |               |  |
|                                   | luj  |  |                                |            |               |  |
|                                   | P  |  |                                |            |               |  |
|                                   | Eull Namo:   |  |                                | Phone No : |               |  |
| age                               | Full Name:   |  |                                |            |               |  |
| ama                               | Address:<br>Description of Property                |  |                                |            |               |  |
| y Da                              |  |  |                                |            |               |  |
| Owner of<br>Property Damage       |  |  |                                |            |               |  |
| do.                               |  |  |                                |            |               |  |
| Οđ                                |  |  |                                |            |               |  |
|                                   | Nama:  |  |                                |            |               |  |
|                                   | Name:<br>Address:                                  |  |                                | Phone No : |               |  |
|                                   |  |  |                                |            |               |  |
|                                   | Name:<br>Address:                                  |  |                                |            |               |  |
| s                                 |  |  |                                |            |               |  |
| sse                               | Name:<br>Address:                                  |  |                                |            |               |  |
| Witnesses                         | / dui 066.   |  |                                |            |               |  |
| Wit                               |  |  |                                |            |               |  |

# NOTICE of INCIDENT continued

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PLEASE CONTINUE ON REVERSE SIDE.

| of              |                     | cident:  |
|-----------------|---------------------|--|
| Description     |                     |  |
| Desci<br>Incide |                     |  |
|                 |                     |  |
| Date:           |                     | _  |
| Reported        | l by:               |  |
|                 |                     |  |
| Mail in du      | plicate to:         | Risk Management Division<br>Montoya State Office Building<br>P. O. Drawer 26110<br>Santa Fe, New Mexico 87502-6110 |
|                 | State of New Mexico | - Uniform Incident Report Used for non-highway, loading, parking-lot.  |

2025

### PRE-USE EQUIPMENT INSPECTION CHECKLIST

https://gacc.nifc.gov/nrcc/dc/mtmcc/DOCUMENTS/Logistics/OF-296 Equipment%20Inspection.pdf

| GENERAL EQUIPME  | NT INFO       | ORMATIO     | N             |          | 10. PRE-USE INSPECTION  |               |
|--|---------------|-------------|---------------|----------|---|---------------|
| 1. INCIDENT NAME/NO.   | 2. RESO       | URCE ORDER  | NO.           |          | Accepted Rejected   | _             |
| 3. CONTRACTOR NAME   |               |             |               |          | MILES/HRS DATE TIME<br>Inspector's printed name Title   | _             |
|  |               |             |               |          | Inspector's signature Title   | -             |
| 4. AGREEMENT NO.   |               | 5. EXPIRAT  | ION DA        | TE       | Section III—LIABILITY   | =             |
| 6. MAKE/MODEL  | 7. EQUIPI     |             |               |          | The purpose of this checklist is to document pre-existing vehicle/equipm  | nent          |
| 8. VIN/SERIAL NO.  |               | 9. LICENSE  | NO./ST        | TATE     | condition and to determine suitability for incident use. I hereby acknowledge<br>responsibility and liability for the operation and mechanical condition of the vehi<br>equipment described herein. | full<br>icle/ |
|  |               |             | Acce          | otable   | Operator's printed name Title   | _             |
| Section I—HEAVY EQUIPMENT  |               |             | YES           | NO       | Operator's signature Date   | _             |
| <ol> <li>ROPS, roll-over protection system: Manu<br/>system secured to mainframe of tractor.<br/>approved seat belts.</li> </ol> |               |             |               |          | Section IV—TRANSPORT OR SUPPORT VEHICLES  | able<br>NO    |
| <ol> <li>Gauges and lights: mounted and function</li> </ol>  | properly.     | *           |               |          | 1. "DOT" or CVSA inspection in the last 12 months (if required). *  |               |
| 3. Battery: check for corrosion, loose terminal  | s, and hold   | downs.      |               |          | 2. Gauges and lights: mounted and function properly.  |               |
| 4. Engine running: check oil pressure, knoc  |               |             |               |          | 3. Seat belts: operate properly for each seating position. *  |               |
| 5. Sweeps, deflectors, safety screens, glass   | s.            | *           |               |          | 4. Glass and mirrors, no cracks in vision. *  |               |
| 6. Steering components: tight, free of play.   |               | *           | 1             |          | 5. Wipers, washers, and horn operate properly.  |               |
| 7. Brakes: damaged, worn or out of adjustn   | nent.         | *           |               |          | 6. Clutch pedal: proper adjustment (if applicable).   | _             |
| B. Exhaust system: equipped with a USFS-   | qualified sp  | ark *       |               |          | 7. Cooling system: full, free of leaks and damage.  |               |
| arrester unless turbocharged.  |               | *           | <u> </u>      | <u> </u> | 8. Fluid levels (e.g. oil) and condition: full and clean.   |               |
| 9. Fuel system: free of leaks and damage.  |               | *           | <u> </u>      |          | 9. Battery: check for corrosion, loose terminals and hold downs.  |               |
| 10. Cooling system: full, free of leaks and d  |               | *           | -             |          | 10. Fuel system: free of leaks and damage.  |               |
| 11. Fan and fan belts: check for proper tens   |               | 10.100      |               |          | 11. Electrical system: alternator and starter work.   |               |
| <ol> <li>Engine support, equalizer bar, springs,<br/>shackle bolts, shifted spring leaf.</li> </ol>                              |               | 2           |               |          | 12. Engine running: check oil pressure, knocks, and leaks.  |               |
| <ol> <li>Belly plate, radiator guards: securely me<br/>debris.</li> </ol>  | ounted and    | free from * |               |          | 13. Transmission: check for leaks.  | _             |
| 14. Final drive, transmission and differentia  | l check for   | dripping    |               | -        | 14. Steering components: tight, free of play.   |               |
| 15. Sprocket and idlers: crack in spokes, sh   |               |             | -             |          | 15. Brakes: damaged, worn or out of adjustment.   | -             |
| no welds.  |               |             | <u> </u>      |          | 16. 4-Wheel drive: check transfer case, leaks (if applicable).  | _             |
| <ol> <li>Tracks and rollers: no broken pads, loos<br/>flanges. Grouser height 1-1/4" min.</li> </ol>                             | se rollers, b | vroken *    | 0             |          | 17. Drive line U-joints: check for looseness.   |               |
| 17. Dozer and assembly: trunnion bolts mis   | sing, crack   | s. *        |               |          | 18. Suspension systems: springs, shocks, other. *   |               |
| 18. Rear hitch (drawbar): serviceable, safe.   | 2             |             |               |          | 19. Differential(s): check for leaks.   |               |
| 19. Body and cab condition: describe dents   | and dama      | ge.         |               |          | 20. Exhaust system: no leaks under cab or before turbo. *   |               |
| <ol> <li>Equipment cleanliness: all areas free of<br/>materials, noxious weeds, and invasive</li> </ol>                          |               |             |               |          | 21. Frame condition, body/bed properly attached. *  |               |
| 21. All hydraulic attachments: operate smoo  |               |             | 1             |          | 22. Tires/wheels (including spare and all changing equipment) * sufficient load rating, tread depth, no major damage.   |               |
| cylinders hold at extension; hose, lines,<br>excessive wear and/or leaks.  | and pump      | s have no   |               |          | 23. Body and interior condition: describe and locate damage on  |               |
| 22. Backup or travel alarm (minimum 87 db  | D.            | *           | +             | <u> </u> | back of page 3, Section IV, item 23.  |               |
| 23. Oil level and condition: full and clean.   | <i>.</i>      |             |               |          | 24. Emergency equipment required. * Fire extinguisher Spare fuses Reflectors  |               |
|  |               |             | 1             |          | 25. Operator(s) properly licensed. † Expiration Date  |               |
| Section II—ATTACHMENTS/PUMP/C<br>OTHER (Specify)   | HAINSA        | W/OR        | Accept<br>YES | ntable   | State License No Class  |               |
| 1. No missing/broken components, no loos   | e hardware    |             | 123           | 110      | Endorsement Med. Cert. Expiration Date  | _             |
| 2. Sufficient fluid levels (oil, coolant, etc.)  | - nai uwale   |             | -             |          | 11. RELEASE No Damage/No Clair  |               |
| 3. Cutting bar: straight, chain in good condi  | tion.         |             | +             | -        | MILES/HRS DATE TIME   | _             |
| <ol> <li>Outting bar: sharp, good repair.</li> </ol>   |               |             | 1             |          | Operator's printed name Title   | _             |
| 5. Pump: builds pressure, no water or oil le   | aks.          |             | <u> </u>      |          | Operator's signature Date   |               |
| <ol> <li>Engine starts, idles, and shuts off with sv</li> </ol>  |               |             | 1             |          | Inspector's printed name Title  |               |
|  |               |             |               |          |   | _             |

VELICIE AND FOUR MENT OF USE INSPECTION OF OUR AND

\* Safety Item—Do not accept until brought into compliance. † Include information for additional operators in REMARKS section. SEE SUPPLEMENTAL INFORMATION ON BACKSIDE OF CONTRACTOR COPY

7540-01-120-0607 PREVIOUS EDITION NOT USABLE

FINANCE COPY - PRE-USE

OPTIONAL FORM 296 (REV. 2-2016) 50296-103

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

|            | CR                                     | REW TI      | ME RE      | EPOR         | г         |             |          |
|------------|--|-------------|------------|--------------|-----------|-------------|----------|
| (1) CREW   | NAME                                   |             |            |              | (2) CRE   |             | R        |
| (3) OFFICE | RESPONSIBLE FOR FIRE                   | (4) FIRE    | NAME       | • •• • • • • | (5) FIRI  |             | 1        |
| (6)<br>RE- | (7)                                    |             | (8)        | DATE         | 9)        |             | 0)       |
| MARKS      | NAME OF EMPLOYE                        | E           | CLASSIF-   |              | y Time    | Military    | / Time   |
| NO.        | <u></u>                                |             |            | ON           | OFF       | ON          | OFF      |
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| <u> </u>   | ······································ |             |            |              |           |             |          |
| (11) REMA  | ARKS                                   |             | <b>I</b>   |              | 1         |             | L        |
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| <u> </u>   |  |             |            |              |           |             |          |
| (12) OFFI  | CER-IN-CHARGE (Signature               | :)          |            | (13) TI      | LE (Offic | er-in-Charg | ie)      |
| (14) NAME  | (Person Posting to Emergence           | cy Time Rep | port)      |              | [1        | 5) DATE     | <u> </u> |
| 261-101    |  | Pre         | scribed by |              |           | RD FORM     |          |

# NEW MEXICO RESOURCE MOBILIZATION PLAN FOR WILDLAND FIRE INCIDENTS

|                         |            |           | EM                | ERG                  | EN   | CY F           | FIRE                | FIGH        | TER       | T           | IME P                     | IEPO           | RT               |               |           |                         | 1. Identificat    |                    | 1047<br>324:1 | L          |                    |
|-------------------------|------------|-----------|-------------------|----------------------|--|----------------|---------------------|-------------|-----------|-------------|---------------------------|----------------|------------------|---------------|-----------|-------------------------|-------------------|--------------------|---------------|------------|--------------------|
| 2. Social Se            | ocurity    | y Numbe   | þir -             |                      |  |                | •                   | t (X one)   |           |             | 1                         |                | mployme          |               |           |                         | _                 |                    |               |            |                    |
| 5. Transferr            | red Fr     | rom       |                   |                      | 8. Hin                                       | D Yes<br>ed At |                     | □ No        |           | Ţ           | 7. Employ<br>Been<br>Disc |                |                  |               | Trav      | tied To R<br>rel Time ( | teturn<br>(X one) |                    |               | rtation () | X one)             |
| <del>.</del>            |            | 715       | 2 000             | EMU                  | <u> </u><br>3T RF                            | ENTE           | RED P               | ELOW        |           |             | Disc                      | narged         |                  |               |           | Yes<br>ASE OF           |                   |                    |               | -          | No                 |
| 10. Name (i             | (First,    |           |                   |                      | ., 95  |                |                     |             |           |             |                           | 15. Ne         | ime              |               |           |                         |                   |                    |               |            |                    |
| 1. Street A             | Addre      | <b>95</b> |                   |                      |  | <u> </u>       |                     |             |           |             |                           | 16. St         | reel Add:        |               |           |                         |                   |                    |               |            |                    |
| 2. City                 | . <u></u>  | _         |                   |                      |  | 13. 5          | itate               | 14. Zi      | p Code    |             |                           | 17. Ci         | ły               |               |           | <u> </u>                | 18. State         | 19.                | Telephone     | No. (Incl  | tude Area<br>Code) |
|                         |            |           |                   |                      |  |                |                     | <u> </u>    |           | <u>.</u>    | 0017                      | L              |                  | TIC           |           | 1                       | <u>,</u>          |                    |               |            |                    |
| •<br>,                  |            | Column    | A                 |                      | _  |                |                     | Colum       |           | ie l        |                           |                |                  | _             | lumn C    |                         | •                 |                    | Colum         | n D        |                    |
| . Fire Neme             |            |           |                   |                      |  | 1. Fire I      | Name                |             |           |             | •                         | 1. Fire        | Name             |               |           |                         | 1. Fire (         | Name               |               |            |                    |
| . Fire No.              |            |           |                   | Jnit Code            | -  | 2. Fire i      | No.                 |             | 3.        | Unit        | Code                      | 2. Fire        | No.              |               | 3. Ui     | nil Code                | 2. Fire (         | No.                |               | 3. U       | nit Code           |
| . Fire Locati           | ion        |           |                   | 5. State             | <del>,  </del>                               | 4. Fire I      | Location            |             | l         | 5.          | State                     | 4. Fire I      | Location         |               | <u>l</u>  | 5. State                | 4. Fire 1         | Location           |               | p          | 5. State           |
| . Firefighter (         |            | lication  |                   | 7. Rate              |  |                |                     | safication  |           |             | Rate                      |                | ighter Clas      | sificatio     | n         | 7. Rate                 | 5. Firefi         | ighter Cla         | sufication    |            | 7. Rele            |
| . Date and T            |            |           |                   | l                    |  | 8. Dete        | and Time            |             |           | 1_          |                           | 8. Dete        | and Time         |               | <b>نے</b> | L                       | 8. Dete           | and Tim            |               |            |                    |
|                         | a. Yee     | Start     | Stop              | _<br>_ ~             | ours   | Mo.            | a. Y<br>Day         | (ear        | Stop      | —<br>_      | Hours                     | Mo.            | a. Ye<br>T Day T | Start         | Stop      | -<br>Hour               | rs Mo.            | e. '<br>Dev        | Yeer<br>Stelt | Stop       | -<br>How           |
| Mo. Der<br>b. C.        | -          | d.        | 510p              | +-"                  | <u>.                                    </u> | NIC.           | c                   | d.          |           | +           | Ĩ                         | b.             | <u> </u>         | d.            | 0.        | +                       |                   | + <u> </u>         | <u> </u>      | -          | + <sup>1</sup>     |
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|                         |            | _ 1       |                   | Ļ                    | _[   |                |                     | ļ           | L         |             |                           | ļ              |                  |               |           | 1                       |                   | L                  |               | <b> </b>   | <u> </u>           |
|                         | Τ          |           |                   |                      | T  |                |                     |             |           |             |                           |                |                  |               |           | <u> </u>                |                   | L                  |               | L          |                    |
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|                         | -+         |           |                   | +                    | -+   | L              |                     |             | †         | 1           |                           | 1              |                  |               |           | +                       | _                 | †                  | 1             | 1          | 1                  |
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| Total Hou               | <br>wrs    |           |                   |                      |  | 9. Tota        | L Hours             | L<br>       | L         | •           |                           | 9. Tote        | l Hours -        |               | <b></b>   | ,                       | 9. Tota           | i<br>1 Hours       | ۱             | ·          | ·                  |
| 0. Gross Au<br>(Nem 7 x |            | t         | ا<br>ر            | <b>,</b>             | 1  | 10. Gro        | oss Amo             | ount        |           | <b>→</b>    |                           |                | m 7 x ite        | unt<br>mov -  |           | ;†                      | 10. <u>G</u> re   | oss Am<br>m:7 x it | ount          |            | <del>,</del>       |
| 1. Inclusive            |            |           |                   | <u></u>              | {  | 11. Inc        | m 7 x iti<br>kusive | em 9)       |           | -1          | <u> </u>                  | 11. Inc        | lusive           | an <b>3</b> ) | •         | -4                      | 11. Incl<br>Dat   | lusive             |               | <b></b>    |                    |
| Dates<br>2. Time Offic  | icer's S   | igneture  |                   |                      |  | Dal<br>12. Tim |                     | 's Signatur | e         |             |                           | Der<br>12. Tim | e Officer's      | i Signati     | Ne        |                         |                   |                    | 's Signature  | <u>.</u>   |                    |
| 3. Date Sign            | ned        |           |                   |                      |  | 13. Det        | e Signed            |             |           |             |                           | 13. Det        | e Signed         |               |           |                         | 13. Det           | le Signed          | 1             |            |                    |
| 21.5                    | HOW        | "H" FO    | H HAZ             | ARD P                |  | <u>0 "E"  </u> | PLUS %              | FORE        | WRON      | IME         | INTAL DIF                 | FEREN          | TIAL A           |               |           |                         | 22. Comm          | issary Re          | scord         |            |                    |
| À                       | N THE      | 8.        |                   |                      |  |                | AR EMP              |             | E. Object |             | **                        |                |                  | -             | Date      |                         | b. Item           |                    | T             | c. /       | Amount             |
| Comm.<br>BO 2600        | 1          | Rate      | H H               | C.<br>les*/<br>lours | (#)  |                |                     |             | (a) (b)   |             |                           | F. Amou        | nt <sub>.</sub>  | 1             |           |                         |                   |                    | <b> </b>      |            |                    |
|                         | 1          |           | 1                 | <b></b>              | <b> </b>                                     | 1              |                     |             |           | Ļ           | <u> </u>                  |                | Gross            |               |           |                         | <u>_</u>          |                    |               |            |                    |
|                         |            |           |                   |                      |  |                |                     |             |           | L           |                           |                |                  |               |           |                         |                   |                    |               | <u> </u>   |                    |
|                         | Τ          |           |                   |                      |  | 1              |                     |             | T         | Γ           |                           |                | Selary           |               |           |                         |                   |                    |               |            |                    |
|                         | 1          |           | $\top$            |                      |  | 1              |                     |             | 1         | Ţ           | 1                         |                | ] "              | $\square$     |           |                         |                   |                    | <b>T</b>      |            |                    |
|                         | +          |           | <u>†</u>          |                      |  | 1              |                     |             | +         | 1           | 1                         |                | Equip.           |               | Total     | ····                    | ······            |                    | <b></b>       |            |                    |
|                         | +          |           | +                 |                      | $\vdash$                                     | +              |                     | ┝─┼         |           | ╉           | +                         |                | Rental           | 24.           |           | k Numbe                 | er and Stam       | <u>ρ</u>           |               |            |                    |
| 3. Remark               | L.         |           | 1                 |                      | l  |                |                     |             | <u>i</u>  | 1           |                           |                | Gross            | -             |           |                         |                   |                    |               |            |                    |
|                         |            |           |                   |                      |  |                |                     |             |           |             | <b> </b>                  | . <u></u>      | Earning          | 4             |           |                         |                   |                    |               |            |                    |
|                         |            |           |                   |                      |  |                |                     |             |           |             | 1                         |                | Comm.<br>Deduct. | 1             |           |                         |                   |                    |               |            |                    |
|                         | ment       | from avi  | are co<br>allable | appropri             | id prop                                      | er for         | <b>_</b>            |             |           |             |                           |                | Net<br>Earning   | 1             |           |                         |                   |                    |               |            |                    |
| 5. Employee             |            |           |                   |                      |  |                | 28. Tir             | ne Officer  | (Signetu  | <b>10</b> ) |                           |                |                  |               |           |                         |                   |                    |               |            |                    |
| Equipment n             | tentels    | mbet be s | supporte          | d with O             | F-294 a                                      | nd OF-3        | <u> </u>            | · · ·       |           | •           | NSN 7540-0                | 1-124-78       | 33               | -4            |           |                         |                   | USD                | TIONAL FO     | )RM 288    | I (Rev. 3          |
|                         |            |           |                   |                      |  |                |                     |             |           | c           | OPY 1                     | FILE           | COP              | Y             |           |                         |                   | 502                | 88-102        |            |                    |

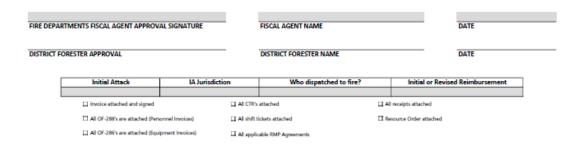
#### NEW RMP INVOICE REQUEST FORMS ARE BEING REVISED. PLEASE USE CURRENTLY AVAILABLE REIMBURSEMENT REQUEST FORMS.

#### BELOW IS AN EXAMPLE OF PROPOSED FORM ONLY.

| <br>pd | <br> | - | . 6 | 5. | <b>C</b> / | - | n | •  | •  |
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| BILL TO  |            |        | REMIT TO           |                               |
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| District |            |        | Remit To Name      |                               |
| Address  |            |        | Remit To Address   |                               |
| Phone    |            |        | Remit To TIN       |                               |
| Fax      |            |        | Remit To SHARE ID: |                               |
|          |            |        | Cooperator         |                               |
|          | Fire Name  |        | JPA/MOA #:         |                               |
| Fir      | re Number  |        |                    |                               |
|          | RO #       |        |                    | Forestry Division Invoice No. |
| In       | voice Date |        |                    |                               |
| Invoice  | Submitted  |        |                    |                               |
| Mi       | leage Rate | \$0.45 |                    | Fiscal Agent Invoice No.      |

|          | Date | Equipment | Personnel | Meals   | Hotels | Additions | Subtractions   | Daily Total |
|----------|------|-----------|-----------|---------|--------|-----------|----------------|-------------|
|          | Date | Total     | Total     | IVICEIS | noteis | Additions | Subtractions   | Daily Total |
| 1        |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 2        |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 3        |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 4        |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
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| 6        |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 7        |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 8        |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 9        |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 10       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 11       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 12       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
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| 14       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 15       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 16       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 17       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 18       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 19       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 20       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 21<br>22 |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 22       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 23       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 24       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 25       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 26       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 27       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 28       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 29       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 30       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
| 31       |      | \$0.00    | \$0.00    | \$0.00  | \$0.00 | \$0.00    | \$0.00         | \$0.0       |
|          |      |           |           |         |        |           | INVOICE TOTAL: | \$0.0       |



Page 1 of 1

| Date:   | Incident Number:  | Incident Name:           | Unit:         |  |
|---|---|--------------------------|---------------|--|
| Incident Type:  | Operational Period:   | Incident commander:      | IC Type (1-5) |  |
| JUSTIFICATION   | JUSTIFICATION   | ł                        |               |  |
| Name of Individual(s) or Crew:  |   |                          |               |  |
| stand of marriadings of ciew.   |   |                          |               |  |
| Describe the situation(s) that caused the work<br>(See reverse for examples)                                | shift(s) to exceed 16 hours and provide justifice               | tion(s).                 |               |  |
| Date:   | Hours in excess of 16   | Hours in excess of 16    |               |  |
|   |   |                          |               |  |
| MITIGATION MEASURES   |   |                          |               |  |
| <ol> <li>Describe what you did to mitigate the exce<br/>Management, PMS 902, work/rest policy of</li> </ol> | ss hours above (see NWCG Standards for Inter-<br>n the reverse) | agency Incident Business |               |  |
| 2. Date standard 2:1 work/rest restored.  |   |                          |               |  |
|   |   |                          |               |  |
| SIGNATURE OF INCIDENT SU  | PERVISOR  |                          |               |  |
| NAME:   | TITLE:  | DA                       | TE:           |  |
| SIGNATURE OF AGENCY ADM   | INISTRATOR, INCIDENT COM  | MANDER OR DUTY OFFICER   |               |  |
| NAME:   | TITLE:  | DA                       | TE:           |  |

#### OFFICIAL DOCUMENT FOR EXTENDED WORK SHIFT-<u>SAMPLE</u> AND/OR DEVIATION FROM 2:1 WORK REST POLICY

#### JUSTIFICATION-EXAMPLES OF SITUATIONS CAUSING EXTENDED SHIFTS

Travel time not administratively controllable.

Mobilization and travel of resources to incident location or relocation to incident facilities.

Establishing and maintaining administrative, planning, logistical support for incident.

Evacuation, triage, structure protection, or emergency rescue.

Establishing initial control lines of the fire

Extended attack efforts to control potentially devastating incident activity.

Incident unable to provide personnel with adequate food and lodging.

Other/ Additional.

#### MITIGATION MEASURES

NWCG Standards for Interagency Incident Business Management

Work/Rest Guidelines: Work/rest guidelines should be met on all incidents. Plan for and ensure that all personnel are provided a minimum 2:1 work to rest ratio (for every 2 hours of work or travel, provide 1 hour of sleep and/or rest).

Work shifts that exceed 16 hours and/or consecutive days that do not meet the 2:1 work/rest ratio should be the exception, and no work shift should exceed 24 hours. However, in situations where this does occur (for example, initial attack), incident management personnel will resume 2:1 work/rest ratio as quickly as possible.

# APPENDIX F: FIRE DEPT. IMT APPLICATION REQUEST FORM

| Employee Na  | me  |
|--|---|
| Fire Department Na   | me  |
| Team Applying  |   |
| Geographic Area (G   |   |
| Position applying  | for   |
| Current NWCG Red Card Qualificat   |   |
|  | 2   |
|  | 3   |
|  | 4   |
|  | 5   |
|  | 6   |
|  | 8   |
|  | bate  |
| FORESTRY DIVISION DISTRICT OFFICE  |   |
| District Office Printed Na   |   |
| APPROVED Signa   | ture  |
|  | Date  |
| FORESTRY DIVISION Resource Protection Bu   | reau  |
| Resource Protection Bureau N   | ame   |
| APPROVED Signa   | ture  |
| ]  | Date  |
| fire incident management team. This form m<br>Division prior too submission of an actual Inc | partment personnel requesting to participate on a wildland<br>ust be received and approved by New Mexico Forestry<br>ident Management Team Application, regardless of team type<br>is completed in a timely manner to meet team application |

# **GLOSSARY**

Apparatus: A fire engine or other vehicle designed and equipped for fire suppression work.

**Check-in:** The required procedure by which resources, upon their arrival at an incident, are determined to be qualified and are properly documented for use at the incident.

**Commissary:** A method for providing personal provisions, supplies, or equipment for individual firefighters on an incident. Needed items are issued to the firefighter, and the cost of the items deducted from their pay.

**Demobilization:** A procedure that includes planning and scheduling the release of a resource from an incident, the completion of all necessary documentation, and the return travel to the home jurisdiction of the resource.

**Drop Tank:** Lightweight portable folding tank that is deployed on the ground and used to hold water. Typical capacities range from 500 gallons to 3,000 gallons. Drop tanks are standard equipment on structural water tenders.

**Equipment:** Implements or machinery employed in firefighting, including but not limited to pumps, radios, and chainsaws.

**Expendable Supplies:** Items such as first aid supplies, hoses, adapters, personnel protective equipment, and hand tools that are used on an incident and expected to be restocked.

**Forestry Division:** A division of the State of New Mexico, Energy, Minerals, and Natural Resources Department, whose responsibilities include prevention and suppression of wildfires on all non-federal and non-municipal lands within the state. The Forestry Division maintains local offices in each of six districts across the state.

**GPM:** Abbreviation for "gallons per minute"; a standard measurement of water flow and output capacity of pumps.

**Incident:** An occurrence which requires action by qualified resources to prevent or minimize loss of life or damage to property; primarily used within this document to refer to a wildland or wildland/urban interface fire.

**Incident Command System:** A standardized on-scene emergency management concept specifically designed to allow its users to adopt an integrated organizational structure equal to the complexity and demands of single or multiple incidents, without being hindered by jurisdictional boundaries. The system referred to in this document is the National Interagency Incident Management System (NIIMS) Incident Command System (ICS). The NIIMS ICS was developed by the National Wildfire Coordinating Group and has become the national standard. In New Mexico, NIIMS ICS has been designated for use on all interagency incidents.

**Incident Commander:** The individual who has been delegated responsibility, by the agency or agencies with jurisdiction, for the management of all incident operations at the incident site.

**Interagency Dispatch Center:** Formerly known as "Zones". A defined geographic area within which there is coordination and sharing of resources between agencies that have wildfire responsibility. The boundaries of a dispatch center are established based on logical sources and movement of resources within the zone. Commitment of resources within the zone is coordinated by a dispatch office now referred to as the Interagency dispatch center. There are five centers within New Mexico that are referred to in this RMP.

#### Interface: see "Wildland/Urban Interface"

**Joint Powers Agreement (JPA) or Memorandum of Agreement (MOA):** A cooperative agreement that establishes a contractual relationship between government bodies. In New Mexico, Joint Powers Agreements are specifically authorized and regulated by state law (NMSA 1978, Sections 11-1-1 through 11-1-17).

**LDH:** An abbreviation for "large diameter hose". In the fire service, this is typically used to refer to hose that is three inches in diameter or larger.

**Local Government Fire Department:** An organization created by county or municipality and delegated responsibility for control, suppression, and prevention of fires within the jurisdiction of the county or municipality. Local government fire departments are primarily trained and equipped for structural fire operations. In New Mexico counties and municipalities receive supplemental funding from the State for qualifying county or municipal fire departments under the "Fire Protection Fund Act".

Manifest: A list of all supplies and equipment carried on any specific fire apparatus.

**Mobilization:** The assembling of requested and qualified resources, their departure from their home station, and their arrival and check-in at an incident.

**NFPA:** The "**National Fire Protection Association**" is a multidisciplinary organization that provides technical, educational, and statistical information for fire prevention and safety, and develops and publishes fire safety codes collectively known as "The National Fire Codes". Several specific NFPA codes are referenced in this document.

**NWCG:** The "**National Wildfire Coordinating Group**" is made up of top fire managers from federal and state agencies that have wildfire responsibility, and promotes interagency cooperation, coordination, and standardization. A number of NWCG standards and publications are referenced in this RMP.

**Position Task Books (PTBs):** A compilation of all the critical tasks required of any specific job function (position). The NWCG publishes a specific PTB for each position within the ICS qualification system. The PTB provides for the documentation of task performance under qualified supervision and becomes a legal record of the qualification process.

**PPE:** An abbreviation of "Personal Protective Equipment", which for a wildfire incident is made up of the fire-resistant clothing, hard hat, boots, and fire shelter that are intended to protect the individual firefighter from the typical hazards of the environment.

**Qualified Resource:** A resource meeting or exceeding the minimum standards described in the New Mexico Resource Mobilization Plan, and those NWCG and NFPA standards referenced in the RMP.

**Red Card:** An identification card listing ICS positions that the bearer has qualifications and agency certification to perform. It is used at the time of check-in to document that the resource is qualified to perform in the position that was requested.

**Requested Resource:** As used in the RMP, a resource that has been specifically requested by EMNRD, Forestry Division for use on an incident and has been documented by a resource order.

**RMP:** Abbreviation for "Resource Mobilization Plan". As used in this RMP, it is a reference to the New Mexico Resource Mobilization Plan, which is authorized by, and a companion document to, Joint Powers Agreements/Memoranda of Agreement between EMNRD and counties and municipalities.

**SCBA:** Abbreviation for "self-contained breathing apparatus", which is part of the standard personal protective equipment for structural firefighters.

**Single Resource Boss:** The title of a person who is qualified under ICS to supervise a single resource, such as an engine or a handcrew.

**Strike Team:** A standard number of the same kind and type of resources organized into a single unit, having common communications, and supervised by a single leader. For example, a Strike Team of Engines is five engines of the same type under the supervision of a Strike Team Leader.

**Task Force:** A task force is made up of a combination of resources of different kind or type, all having common communications capabilities, and under the supervision of a single leader. An example of a Task Force might be a combination of three Type 1 Engines and a Water Tender, or a combination of engines and handcrews.

**USDA:** The United States Department of Agriculture. The agency within the USDA with wildfire responsibility is the Forest Service.

**USDI:** The United States Department of the Interior. Agencies within the USDI with wildfire responsibility include the Bureau of Land Management (BLM), the Bureau of Indian Affairs (BIA), the National Park Service (NPS), and the Fish and Wildlife Service.

**Wildland/Urban Interface:** A term broadly applied to include areas adjacent to wildlands, structures next to and within wildlands, and any area where wildlands and the interests, activities, and developments of man come together.

For more *National Wildfire Coordinating Group (NWCG)* Glossary of Wildland Fire Terminology go to <u>https://www.nwcg.gov/glossary/a-z</u>.