

# Acquired Structure Incident Action Plan



*Customized Training & Continuing Education*



**ALEXANDRIA**

TECHNICAL & COMMUNITY COLLEGE

CUSTOMIZED TRAINING CENTER

Address: \_\_\_\_\_  
\_\_\_\_\_

Training date: \_\_\_\_\_

AHJ: \_\_\_\_\_

Instructor-in-Charge: \_\_\_\_\_

## Donation of a Building for Fire Training

\_\_\_\_\_, thank you in advance for offering to donate your structure to be used by the local fire department for live fire training. This is valuable real-life training on situations our fire fighters may face at any time. As the owner, you also benefit from the demolition of the structure not only by its removal, as it is a liability, but the possibility of including it on your taxes as a reasonable donation to the local fire department. This letter lists an overview of the duties and responsibilities of each party involved in this fire training.

**The structure, located at:** \_\_\_\_\_

- ☐ Must be safe for entry
- ☐ Interior must be in a condition to allow controlled burning
- ☐ No prohibited materials left within the structure

### Owner's Responsibility:

- ☐ This is a demolition project therefore state law requires an asbestos inspection by a certified inspector. Supply copies of inspection to both fire department and college fire training program.
- ☐ The cost of the inspection, removal and disposal of prohibited materials is the responsibility of the owner.
- ☐ Ensure the removal and disposal of the remaining debris is in compliance with MPCA rules, county ordinances, and state law.
- ☐ Removal of all appliances, hazardous chemicals, flammable materials, pressure vessels, thermostats and florescent lighting.
- ☐ Removal of carpet or other flooring materials deemed a hazard.
- ☐ Return the debris site to a safe condition.
- ☐ Maintain liability insurance on the structure and property.

Owner Signature \_\_\_\_\_ Date: \_\_\_\_\_

(continued)

**Fire Department Responsibilities:**

- ☐ Inspection of property for training use to determine usability.
- ☐ Apply for training burn permits from MN DNR.
- ☐ Assist owner in preparation of the interior of the structure if requested.
- ☐ Make arrangements for small bales of straw and wooden pallets.
- ☐ Arrange for adequate engines, tenders and staff.
- ☐ Secure a BLS transport ambulance and staff during evolutions.
- ☐ Personnel required to wear SCBA shall comply with OSHA 1910.134 g facial hair standards.
- ☐ Conduct safe operations during evolutions by following NFPA 1403-12 standards for live fire training with the assistance of the qualified MnSCU fire training institution.
- ☐ Maintain liability and workers compensation insurance during training evolutions.
- ☐ If final resolution is a total removal, continue operations until structure is fully burned down.

Chief/Training Officer Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Training Institution**

- ☐ Assist in arrangements for asbestos inspection.
- ☐ Assist Fire Dept with MN DNR Training Burn Permit.
- ☐ Follow NFPA 1403-12 standards for live fire training.
- ☐ Provide qualified instructors and adequate staffing for safe training.
- ☐ Maintain liability and workers comp insurance throughout evolutions on training staff.

Ridgewater College \_\_\_\_\_ Date: \_\_\_\_\_  
Willmar, MN

Alexandria Technical & \_\_\_\_\_ Date: \_\_\_\_\_  
Community College,  
Alexandria, MN

## **OWNER'S RELEASE TO DAMAGE OR BURN STRUCTURE**

Having agreed with the building officials of City/County of \_\_\_\_\_,

The structure owned by:

(Owner) \_\_\_\_\_ Address: \_\_\_\_\_, MN Zip \_\_\_\_\_

Phone # \_\_\_\_\_. Cell \_\_\_\_\_. Email \_\_\_\_\_

Donated training structure information:

911 Address: \_\_\_\_\_ County: \_\_\_\_\_

Township: \_\_\_\_ Range: \_\_\_\_ Section: \_\_\_\_\_

Is under condemnation, unfit for human habitation, beyond rehabilitation and I desire the structure to be demolished. I further agree that the structure should be used by the fire service for training as they see fit. In order that demolition may be accomplished, I give my consent to the \_\_\_\_\_ Fire Department and Ridgewater College Fire Training Program to use or demolish the said structure by burning or other means.

\_\_\_\_\_  
Owner

Date: \_\_\_\_\_

\_\_\_\_\_  
Owner

Date: \_\_\_\_\_

\_\_\_\_\_  
Fire Department Representative

Date: \_\_\_\_\_

\_\_\_\_\_  
Ridgewater College Representative

Date: \_\_\_\_\_

***Ridgewater College Center for Customized and Continuing Education***

**ACKNOWLEDGMENT OF BUILDING USE AGREEMENT  
PRE/POST-BURN/USE OF PROPERTY CONDITIONS**

**AGREEMENT:**

On this \_\_\_\_ day of \_\_\_\_\_, 2014, an agreement is made between;

\_\_\_\_\_ Department also known as JHA (Jurisdiction Having Authority) and  
Ridgewater College Fire Training Program.

\_\_\_\_\_ (owner) of the building/property to be damaged or destroyed)  
hereinafter called "Owner".

WHEREAS, the City of \_\_\_\_\_ Fire Department desire to further the training of its  
firefighters by conducting live fire training exercises involving the controlled burning  
within a structure and other fire training activities in compliance with  
NFPA 1403 Standards (2012) & NFPA 1001 (2008)

WHEREAS, the Owner acknowledges benefit received in the donation of the structure to further and  
the enhancement of fire protection services.

WHEREAS, the Owner has requested the use/destruction of the structure located at:

**Structure 911 Address:**

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|         |             |          |           |
|---------|-------------|----------|-----------|
| County: | Township T- | Range R- | Section # |
|---------|-------------|----------|-----------|

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A visual description of the structure to be used/or destroyed is as follows:

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|             |   |
|-------------|---|
| Owner Shall | -Confirm the structure is structurally safe to enter/occupy for training purposes<br>-Confirm the structure has been inspected by licensed Asbestos inspector and<br>Owner is responsible for cost of Asbestos inspection and removal of<br>contaminated materials.<br>Owner shall be responsible for removing debris (appliances, fluorescent fixtures,<br>hazardous chemicals, carpet and other items used for human habitation). |
|-------------|---|

WHEREAS, the building to be used/destroyed as identified in the above paragraph will be referred to  
herein as "the structure"; now therefore:

**IT IS MUTUALLY AGREED BY THE PARTIES AS FOLLOWS:**

1. The City/Township and the Entity propose to damage or destroy the structure during the week of \_\_\_\_\_ to \_\_\_\_\_. The actual date of the training will depend upon factors such as availability of personnel, equipment and weather conditions.
2. The Owner agrees to indemnify the City of \_\_\_\_\_ Fire and Ridgewater College from any liability arising out of the lack of the Owner's authority to have the structure destroyed and/or the Owner's lack of clear title to the building/property.



***Ridgewater College Center for Customized and Continuing Education***

3. The Owner agrees to indemnify the City/Township from any liability arising out of any claim of injury from a person who is not an employee of a municipal fire department or of the City/Township in connection with the destruction of the structure.
4. The Owner agrees to indemnify the City of \_\_\_\_\_ Fire Department and Ridgewater College (agents/instructors), or entity from any liability arising out of any claim of injury from any person in connection with the destruction of the structure.
5. The Owner assumes all liability for securing the structure during the term of this agreement, and further, the Owner agrees to comply with all applicable ordinances and regulation of the City/Township, county and state with respect to removal of debris and the destruction activities.
6. The Owner assumes all responsibility for the cancellation of insurance and for the disconnection of all utility services, including but not limited to gas, electric, water, telephone, television cables and antennas, removal of fuel oil, other hazardous substances and conditions, removal of any fixtures, items or equipment the Owner wishes to preserve prior to any destruction activities pursuant to this agreement. **If the Owner has not completed these tasks at least twenty-four (24) hours before the first possible training date, the Owner shall immediately notify the following persons of this fact, Ridgewater College representative or Fire Chief of JHA.**
7. The post-training condition of the structure will be the responsibility of the Owner. The intent is to use the structure and/or demolish sections or all of the structure in training sessions. In most cases the ash, basement walls, foundation, metal debris and any other items will remain in the basement area or close proximity. These materials shall be disposed of by state and county rules at the Owners expense. All cost of sampling will be at Owners expense. If at any time during the training session the Instructor-In-Charge deems it necessary to extinguish the fire, the remains will be responsibility of the Owner.
8. \_\_\_\_\_ Department Shall:  
**Apply for permits required from MN DNR for training burns; confirm permits or notifications to MN PCA for the purpose of Demolition of said structure.**
9. City of \_\_\_\_\_ and Ridgewater College will maintain Liability Insurance and Workman Comp Insurance on all employees during the duration of the training till when site is returned to Owner upon completion of Training.

\_\_\_\_\_ Owner

\_\_\_\_\_ Owner

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

Chief: \_\_\_\_\_  
Name Address Phone

Signature: \_\_\_\_\_

\_\_\_\_\_ Ridgewater College

## NOTICE OF CANCELLATION OR NONRENEWAL

(kind of policy)

| Policy No | Issued through agency or office at: | Cancellation or termination will take effect at:<br>(Date) (Hour-Standard Time) | Date of notice |
|-----------|-------------------------------------|---|----------------|
|           |                                     |   |                |

Insurance company:

Name and address of insured:

(Applicable item is marked)

Cancellation:

☐ You are hereby notified in accordance with the terms and conditions of the above-mentioned policy that your insurance will cease at and from the hour and date mentioned above.  
If the premium has been paid, premium adjustment will be made as soon as practicable after cancellation becomes effective.  
If the premium has not been paid, a bill for the premium earned to the time of cancellation will be forwarded in due course.

Nonrenewal:

☐ You are hereby notified in accordance with the terms and conditions of the above-mentioned policy that your insurance will cease at and from the hour and date mentioned above due to no payment of premium.  
A bill for the premium earned to the time of cancellation will be forwarded in due course.

☐ You are hereby notified in accordance with the terms and conditions of the above-mentioned policy that the above-mentioned policy will expire effective at and from the hour and date mentioned above and the policy will NOT be renewed.

Important  
notice:

☐ In compliance with the Fair Credit Reporting Act (Public Law 91-508), you are hereby informed that the action taken above is being taken wholly or partly because of information contained in a consumer report from the following consumer reporting agency:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

Insured's copy

\_\_\_\_\_  
Authoriza

## SITE INSPECTION PLANNING & EQUIPMENT CHECKLIST

Inspected on \_\_\_\_\_, 20\_\_ by \_\_\_\_\_

The location of this training session is:

911 Address: \_\_\_\_\_

County: \_\_\_\_\_ Township: \_\_\_\_\_

Range: \_\_\_\_\_ Section: \_\_\_\_\_

| COMPLETED |    | ITEM   |
|-----------|----|--|
| YES       | NO |  |
| 1.        |    | All permits, forms and notifications distributed                     |
| 2.        |    | Site plan drawing, including all exposures                           |
| 3.        |    | Building plan, including overall dimensions                          |
| 4.        |    | Floor plan detailing rooms, hallways and exterior openings           |
| 5.        |    | Proposed location of command post                                    |
| 6.        |    | Proposed position of all apparatus                                   |
| 7.        |    | Proposed position of all hose lines, including backup lines          |
| 8.        |    | Proposed location of emergency escape routes                         |
| 9.        |    | Proposed location of emergency evacuation assembly area              |
| 10.       |    | Proposed location of entrance and exit routes for emergency vehicles |
| 11.       |    | Inspect available water supply determined as per M 3.6.0             |
| 12.       |    | Required fire flow determined as per M 3.6.0                         |
| 13.       |    | Required reserve flow determines (50% of required flow) per M 3.6.0  |
| 14.       |    | Apparatus pumping ability that exceeds the required fire flow        |
| 15.       |    | Separate water supply established for attack and back-up lines       |
| 16.       |    | Obtain projected and periodic weather reports                        |
| 17.       |    | Proposed parking areas designated and marked for all vehicles        |
| 18.       |    | Operations area established and perimeter marked                     |
| 19.       |    | Communications frequencies established, equipment obtained           |

### BUILDING INSPECTION

|     |  |  |
|-----|--|--|
| 20. |  | Building inspected for structural integrity  |
| 21. |  | All utilities located and identified   |
| 22. |  | Identify highly combustible interior wall and ceiling materials removed                  |
| 23. |  | Identify all holes and walls patched or covered in rooms to be used                      |
| 24. |  | Identify materials of exceptional weight, remove or seal off the area                    |
| 25. |  | Windows checked and opened or closed as needed   |
| 26. |  | Doors checked and opened or closed as needed   |
| 27. |  | Building components checked: roof scuttles, sprinkler system, stand pipes, etc           |
|     |  | Identify chimneys and adequate ventilation holes for each separate enclosed roof area to |
| 28. |  | be removed and pre-cut the day/night of the drill  |
| 29. |  | Identify stairways that need to be made safe with railings                               |
| 30. |  | Identify fuel tanks and water heaters to be removed or adequately ventilated             |



31. Identify all containers of unknown or hazardous contents must be removed
32. Identify unnecessary inside and outside debris removed, extraordinary exterior and interior hazards remedied
33. Porches and outside steps made safe
34. Identify cisterns, wells, cesspools, and other ground openings fenced, marked, or filled
35. Identify toxic weeds, hives, vermin, brush, surrounding vegetation to be removed
36. Identify exposures propane tanks, trees, buildings, utilities to be removed protected
37. Adequate roof ventilation holes cut for each roof section or area

#### **APPARATUS NEEDED FOR TYPICAL RESIDENTIAL HOUSE**

38. 2 Class A (750 gpm) or larger capable of meeting the required fire flow with 4.5" or larger hard suction tube. One engine for attack lines and one for backup lines
39. Water tenders capable of meeting the supply needs if hydrants are not used
40. 2-2000 gallon portable drop tanks if water tenders are used
41. 1 water source capable of supplying the required fire flow if not using hydrants
42. 2 hydrants capable of supplying the required fire flow if tenders are not used
43. 1 EMS unit for possible firefighter emergencies
44. 1 SCBA air supply unit to refill SCBA
45. 4-1.5" or 1.75" nozzles
46. 2 gated wyes - 1.5x1.5x2.5
47. 600 hundred feet of 1.5" hose. Attack, exposure, instructor and backup lines
48. 400 hundred feet of 2.5" hose

#### **BURNABLE CLASS A FUELS & BUILDING SUPPLIES FOR 30 STUDENTS**

49. 30 bales of DRY oats straw or hay or 12 bales (4 ft. sq.) of DRY cardboard
50. 12 dry wood pallets
51. 2 pitch forks
52. 1 hammer and supply of 16 penny nails and spikes
53. 10 extra glass storm windows, not necessary to fit tight on windows
54. 8-4x8 sheets of press board ¾" thick
55. 1 propane torch for igniting fuels

**IMPORTANT – The straw or cardboard must be dry and kept dry.**

#### **PERSONNEL & REHAB SUPPLIES**

56. 1 source of fresh drinking water and cups
57. 1 waste container for cups
58. 1 meal for each person at the drill (no cheese sandwiches)
59. 1 flash light for each student as they enter the structure
60. 4 qualified interior structural or prop burn instructors

## **Site Map / Current Conditions**

**201**

Date: \_\_\_\_\_ Address: \_\_\_\_\_

### **Site Map**

- ☐ Building Outline
- ☐ Property Lines
- ☐ Roads and Accesses
- ☐ Exposures, Utilities
- ☐ Septic Tanks
- ☐ Operational Control Areas
- ☐ Water Sources
- ☐ Site Hazards
- ☐ Support Locations
- ☐ Parking Areas

### **Structure Drawing**

- ☐ Building Size
- ☐ Construction Type
- ☐ Floor Plan
- ☐ Exits
- ☐ Windows
- ☐ Ventilation Points
- ☐ Fire Set Locations

EXTERIOR DIAGRAM

Prepared by: \_\_\_\_\_

## Site Map / Current Conditions

201

Date: \_\_\_\_\_ Address: \_\_\_\_\_

### **Site Map**

- ☐ Building Outline
- ☐ Property Lines
- ☐ Roads and Accesses
- ☐ Exposures, Utilities
- ☐ Septic Tanks
- ☐ Operational Control Areas
- ☐ Water Sources
- ☐ Site Hazards
- ☐ Support Locations
- ☐ Parking Areas

INTERIOR DIAGRAM

### **Structure Drawing**

- ☐ Building Size
- ☐ Construction Type
- ☐ Floor Plan
- ☐ Exits
- ☐ Windows
- ☐ Ventilation Points
- ☐ Fire Set Locations

Prepared by: \_\_\_\_\_

## **Safety Analysis and Plan Checklist**

215

Date: \_\_\_\_\_ Address: \_\_\_\_\_

### **General Safety Message**

- ☐ Hazard zones and required PPE use
- ☐ Accountability Procedures
- ☐ Fuel loads/types/locations
- ☐ Keep fires at controllable size
- ☐ One fire at a time - no fires in exit ways
- ☐ Instructor line in place during ignition and for instructor interior use
- ☐ Ignition procedure
- ☐ Monitor all conditions and personnel for heat and other fire-related emergencies
- ☐ Stay hydrated

### **Specific Safety Procedures**

- ☐ Building evacuation signal (demonstrated to all participants)
- ☐ Evacuation rally point
- ☐ Severe weather plan/shelter
- ☐ Specific site hazards

### **Building Walk Through**

- ☐ With instructor staff
- ☐ With students and instructors
- ☐ Point out exits and ventilation points
- ☐ Final check of fuel loads and structural conditions

Prepared by: \_\_\_\_\_

### QUICK ACCESS PRE-FIRE PLAN

|  |   |   |                                   |
|--|---|---|-----------------------------------|
| <b>Building Address:</b>   |   | <b>Evaluator:</b><br><b>Date:</b>           |                                   |
| <b>Building Description:</b>   |   |   |                                   |
| <b>Roof Construction:</b>  |   |   |                                   |
| <b>Floor Construction:</b>   |   |   |                                   |
| <b>Occupancy Type:</b><br>CCN = Type 1, II, III, IV, V OHCN = 3, 4, 5, 6, 7  |   |   | <b>Initial Response Required:</b> |
| <b>Hazards to Personnel:</b>   |   |   |                                   |
| <b>Location of Water Supply:</b>   |   |   | <b>Available Flow:</b>            |
| <div style="display: flex; justify-content: space-between;"> <div> <b>Estimated Fire Flow</b><br/> <i>Exposures = 25%</i><br/> <b>Of Total Flow Per Exposure 3</b> </div> <div> <b>Length x Width</b><br/> <b>X (floors) = GPM Per Floor</b> </div> </div> |   |   |                                   |
| Level Of Involvement   | <b>25%</b>                              | <b>50%</b>                                  | <b>75%</b>                        |
| Estimated Fire Flow (1)  |   |   |                                   |
| Attached Bldg. Fire Flow(2)  |   |   |                                   |
| Fire Behavior Prediction:  | Total                                   |   |                                   |
| <b>Predicted Strategies:</b>   |   |   |                                   |
| <b>Problems Anticipated:</b>   |   |   |                                   |
| Standpipe: Y or N<br>Control Location:   | Sprinklers: Y or N<br>Control Location: | Fire Detection: Y or N<br>Control Location: |                                   |

Length X Width

1.  $\frac{\text{Length} \times \text{Width}}{3} = \text{GPM/ Floor X } (\# \text{ floors}) = \text{GPM}$

2.  $\frac{\text{Length} \times \text{Width}}{3} = \text{GPM/ Floor X } (\# \text{ floors}) = \text{GPM}$

Total gallons = GPM

3. Exposure Side "A" (25% of total base 100% flow) = GPM

4. Exposure Side "B" (25% of total base 100% flow) = GPM

5. Exposure Side "C" (25% of total base 100% flow) = GPM

6. Exposure Side "D" (25% of total base 100% flow) = GPM

7. 100% involvement plus exposures potential = GPM

## Medical Plan

206

Date: \_\_\_\_\_ Address: \_\_\_\_\_

On-scene EMS: \_\_\_\_\_

- Level of Service (minimum BLS) \_\_\_\_\_
- Transport capabilities: Yes \_\_\_\_\_ No \_\_\_\_\_
- Location: \_\_\_\_\_
- How to contact: \_\_\_\_\_

Nearest Hospital: \_\_\_\_\_

- Location: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Travel time to: \_\_\_\_\_

Helicopter Service: \_\_\_\_\_

- Travel time to site: \_\_\_\_\_
- Contact Information: \_\_\_\_\_
- Landing Zone location: \_\_\_\_\_
- Site GPS coordinates: \_\_\_\_\_

Special Instructions:

Prepared by: \_\_\_\_\_



**Communication Plan**

**205**

Date: \_\_\_\_\_ Address: \_\_\_\_\_

**Personnel**

**Radio Channel Assigned**

Instructor to IC / Safety

\_\_\_\_\_

Fire Department

\_\_\_\_\_

EMS (BLS Transport Capable)

\_\_\_\_\_

Local PSAP for additional resources

\_\_\_\_\_

- Radio Channel \_\_\_\_\_

- Phone number \_\_\_\_\_

Law Enforcement

\_\_\_\_\_

Public Works

\_\_\_\_\_

Other agencies as required

\_\_\_\_\_

Prepared by: \_\_\_\_\_

## LOCAL/REGIONAL LAW ENFORCEMENT NOTICE

On \_\_\_\_\_, 20\_\_\_\_, the \_\_\_\_\_ Fire Department will be conducting a live burn training session which will include demolition of a building by burning (weather permitting).

The location of the training session is:

911 Address: \_\_\_\_\_

County: \_\_\_\_\_

Township: \_\_\_\_\_

Range: \_\_\_\_\_

Section: \_\_\_\_\_

Will you please bring this to the attention of your dispatcher and patrol units. We may need traffic control if the location warrants it.

We would also like to be notified of any reported fires in the area which we are operating from. You may receive reports of a fire by pedestrians. Do not activate the alarm until you have contacted us by radio or phone to confirm the location of the reported fire.

Thank you for your cooperation

\_\_\_\_\_ Fire Chief

\_\_\_\_\_ Fire Department

\_\_\_\_\_ Phone

\_\_\_\_\_ Fax

Date: \_\_\_\_\_

***Ridgewater College Center for Customized and Continuing***

***Education***

***Fire Training Goals and Objectives/General Operational Orders***

***CHECK LIST 202***

Date: \_\_\_\_\_ Address: \_\_\_\_\_

**Goals & Objectives**

Types of fires:

- ☐ Fire Behavior
- ☐ Basic Fire Attack
- ☐ Advanced Engine Company Operations
- ☐ Victims

Number of students and evolutions: \_\_\_\_\_

**General Operational Orders**

Fires:

- ☐ Set location and burn order
- ☐ Set size and combustible materials
- ☐ Ignition process / procedure

Accountability Plan:

- ☐ Riding List
- ☐ PASSPORT
- ☐ When are PARS done
- ☐ Instructor and student rotation plan
- ☐ Water supply / pumper info
- ☐ Rehab and evolution debrief procedure
- ☐ Review of site map with staff including support area locations

Prepared by: \_\_\_\_\_

## **1910.134 SCBA OSHA Guidelines for Fire Service use of SCBA**

### **1910.134(g)**

***Use of respirators.*** This paragraph requires employers to establish and implement procedures for the proper use of respirators. These requirements include prohibiting conditions that may result in facepiece seal leakage, preventing employees from removing respirators in hazardous environments, taking actions to ensure continued effective respirator operation throughout the work shift, and establishing procedures for the use of respirators in IDLH atmospheres or in interior structural firefighting situations.

### **1910.134(g)(1)**

***Facepiece seal protection.***

#### **1910.134(g)(1)(i)**

The employer shall not permit respirators with tight-fitting facepieces to be worn by employees who have:

#### **1910.134(g)(1)(i)(A)**

Facial hair that comes between the sealing surface of the facepiece and the face or that interferes with valve function; or

#### **1910.134(g)(1)(i)(B)**

Any condition that interferes with the face-to-facepiece seal or valve function.

#### **1910.134(g)(1)(ii)**

If an employee wears corrective glasses or goggles or other personal protective equipment, the employer shall ensure that such equipment is worn in a manner that does not interfere with the seal of the facepiece to the face of the user.

#### **1910.134(g)(1)(iii)**

For all tight-fitting respirators, the employer shall ensure that employees perform a user seal check each time they put on the respirator using the procedures in Appendix B-1 or procedures recommended by the respirator manufacturer that the employer demonstrates are as effective as those in Appendix B-1 of this section.

### **1910.134(g)(2)(ii)(A)**

To wash their faces and respirator facepieces as necessary to prevent eye or skin irritation associated with respirator use; or

***Procedures for interior structural firefighting.*** In addition to the requirements set forth under paragraph (g)(3), in interior structural fires, the employer shall ensure that:

### **1910.134(g)(4)(i)**

At least two employees enter the IDLH atmosphere and remain in visual or voice contact with one another at all times;

## **1910.134 SCBA OSHA Guidelines for Fire Service use of SCBA**

### **1910.134(g)(4)(ii)**

At least two employees are located outside the IDLH atmosphere; and

### **1910.134(g)(4)(iii)**

All employees engaged in interior structural firefighting use SCBAs.

**Note 1 to paragraph (g):** One of the two individuals located outside the IDLH atmosphere may be assigned to an additional role, such as incident commander in charge of the emergency or safety officer, so long as this individual is able to perform assistance or rescue activities without jeopardizing the safety or health of any firefighter working at the incident.

### **1910.134(h)**

***Maintenance and care of respirators.*** This paragraph requires the employer to provide for the cleaning and disinfecting, storage, inspection, and repair of respirators used by employees.

### **1910.134(h)(1)**

***Cleaning and disinfecting.*** The employer shall provide each respirator user with a respirator that is clean, sanitary, and in good working order. The employer shall ensure that respirators are cleaned and disinfected using the procedures in Appendix B-2 of this section, or procedures recommended by the respirator manufacturer, provided that such procedures are of equivalent effectiveness. The respirators shall be cleaned and disinfected at the following intervals:

### **1910.134(h)(1)(i)**

Respirators issued for the exclusive use of an employee shall be cleaned and disinfected as often as necessary to be maintained in a sanitary condition;

# **Jurisdiction Having Authority**

## **Goals & Objectives / General Operational Orders**

### **Checklist - 202**

Date: \_\_\_\_\_ Address: \_\_\_\_\_

#### **Goals & Objectives**

Types of fires:

- ☐ Fire Behavior
- ☐ Basic Fire Attack
- ☐ Advanced Engine Company Operations
- ☐ Incident Command on the Fire Ground
- ☐ Water Supply
- ☐ Pump operations
- ☐ Exposure Protection
- ☐ Burn to ground

#### **General Operational Orders**

Fires:

- ☐ Set location and burn order
- ☐ Set size and combustible materials
- ☐ Ignition process / procedure

Accountability Plan:

- ☐ Riding List
- ☐ PASSPORT
- ☐ When are PARS done
- ☐ Water supply / pumper info
- ☐ Rehab and evolution debrief procedure
- ☐ Review of site map with staff including support area locations

Prepared by: \_\_\_\_\_, Chief or officer in charge of Training \_\_\_\_\_ Date



## **Personnel Assignments / Instructions**

**204**

Date: \_\_\_\_\_ Address: \_\_\_\_\_

**Instructor-In-Charge:** \_\_\_\_\_

- Overall site and operations controls and management
- Assure adherence to burn plan and/or modify as conditions require
- Provide for safety of all participants

**Safety Officer:** \_\_\_\_\_

- Provide for and assure overall site safety
- Enforce all safety rules and processes
- Directly supervise and monitor fire sets and the ignition personnel
- Monitor conditions continuously and make changes or stop operations if needed
- Conduct building walk-through for staff and students

**Ignition Personnel:** \_\_\_\_\_

- Assist building fire sets
- Under supervision of Safety Office light fire sets
- When lighting work in pairs with hose line in place
- Use only fuels and Ignition devices provided
- Monitor conditions and participants at all times and report discrepancies to Safety Officer
- Assist as directed by Instructor-In-Charge or Safety Officer

**Control Team:** \_\_\_\_\_ ; \_\_\_\_\_ ; \_\_\_\_\_

- Monitor assigned students at all times
- Assure accountability
- Provide student instruction in accordance with goals and objectives
- Assure students are wearing PPE correctly
- Have no more than 5 students assigned
- Understand the burn plan including ignition procedures
- Assure students are in proper position and ready for each evolution
- May rotate from backup line to attack line, etc. and understand particular expectations of all

## ***SAFETY OFFICER ENTRY TEAM ASSIGNMENT FORM***

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Wind Direction: \_\_\_\_\_ Speed: \_\_\_\_\_ Temp: \_\_\_\_\_

Lead Instructor: \_\_\_\_\_ Safety Officer: \_\_\_\_\_

Instructors: \_\_\_\_\_

Structure Burn: \_\_\_\_\_ Burn Trailer: \_\_\_\_\_ Vehicle Burn: \_\_\_\_\_

Location: \_\_\_\_\_

TEAM A LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM D LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM B LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM E LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM C LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM F LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

## **SAFETY OFFICER ENTRY TEAM ASSIGNMENT FORM**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Wind Direction: \_\_\_\_\_ Speed: \_\_\_\_\_ Temp: \_\_\_\_\_

Lead Instructor: \_\_\_\_\_ Safety Officer: \_\_\_\_\_

Instructors: \_\_\_\_\_

Structure Burn: \_\_\_\_\_ Burn Trailer: \_\_\_\_\_ Vehicle Burn: \_\_\_\_\_

Location: \_\_\_\_\_

TEAM A LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM D LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM B LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM E LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM C LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

TEAM F LEVEL 1 2 3 TIME IN/OUT

Instructor: \_\_\_\_\_

NAME PASS # AIR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

***Ridgewater College Center for Customized and Continuing Education***

**NFPA 1403 Live Fire Training**

**SUMMARY OF ACTIVITIES CONDUCTED AT DRILL - KEEP ON FILE**

**Accounting of Activities Conducted:**

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**Unusual Conditions Encountered:**

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**Changes or Deterioration in the Structure.**

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**Any Injuries or Treatment Rendered.**

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Completed By: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Ridgewater College Center for Customized and Continuing Education**

**NFPA 1403 Live Fire Training**

**PARTICIPANT TRAINING VERIFICATION FORM**

I, \_\_\_\_\_, Chief of the \_\_\_\_\_ Fire Department, do here by authorize the following individuals to participate in this training session. These individuals have meet the requirements of M 2.1.2. pre-training requirements:

Prior to being permitted to participate in live fire training evolutions, the student shall have received training to meet the performance objectives Sections 5-1 through 5-5 of for FIRE FIGHTER I of the NFPA 1001, Standard for FIRE FIGHTER PROFESSIONAL QUALIFICATIONS. Students who are currently enrolled in a Minnesota State Colleges and Universities Recruit or Firefighter I/II course shall be allowed to participate towards the end of the course.

- |                                   |  |
|-----------------------------------|--|
| (1) Safety                        | (6) Fire hose, appliances, and streams |
| (2) Fire behavior                 | (7) Overhaul                           |
| (3) Portable extinguishers        | (8) Water supply                       |
| (4) Personal protective equipment | (9) Ventilation                        |
| (5) Ladders                       | (10) Forcible entry                    |

The following list of firefighters have completed the required training. (Please print)

|    |    |
|----|----|
| 1  | 15 |
| 2  | 16 |
| 3  | 17 |
| 4  | 18 |
| 5  | 19 |
| 6  | 20 |
| 7  | 21 |
| 8  | 22 |
| 9  | 23 |
| 10 | 24 |
| 11 | 25 |
| 12 | 26 |
| 13 | 27 |
| 14 | 28 |

Fire Chief: \_\_\_\_\_, verify that the students listed are physically fit and have meet the education requirements stated above.

DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

## FIRST REPORT OF INJURY

CLASS: \_\_\_\_\_

INSTRUCTOR: \_\_\_\_\_

NAME OF STUDENT: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

STUDENT'S AGE: \_\_\_\_\_ DATE OF INJURY: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ TIME: \_\_\_\_: \_\_\_\_ AM PM

LOST TIME FROM CLASS      Yes      No

### DETAILS OF ACCIDENT

(This information is for use in preventing similar accidents. Please answer all questions.)

1. What task was the student performing?

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2. How was the student injured?

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3. What did the student do unsafely?

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4. What equipment was defective or failed?

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5. What steps should be taken to prevent similar injuries?

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6. Was accident reported immediately? Yes No    If No, Explain: \_\_\_\_\_

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7. Did the student require medical attention as a result of this injury?    Yes    No  
If yes, give name and address of transportation unit, medic, doctor and/or hospital.

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## COMPLETION OF LIVE BURN TRAINING

### TRANSFER OF PROPERTY TO AHJ/FIRE CHIEF/DESIGNEE

On \_\_\_\_\_, 20\_\_ at \_\_\_\_\_ am/pm, the college "Instructor-in-Charge" has officially completed the training session and the property will become the responsibility of the AHJ or local Fire Department.

Property Location:

911 Address: \_\_\_\_\_

County: \_\_\_\_\_

Township: \_\_\_\_\_

Range: \_\_\_\_\_

Section: \_\_\_\_\_

It is the responsibility of the AHJ/Fire Chief or his/her designee to watch for unsafe fire conditions that may require additional resources. The college waives any liability arising from property damage, personal injury, etc. in connection with the destruction of the structure.

\_\_\_\_\_  
*College Instructor-in-Charge*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*AHJ/Fire Chief/Designee*

\_\_\_\_\_  
*Signature*

RIDGEWATER COLLEGE COPY

## TRANSFER OF AUTHORITY OF THE PROPERTY BACK TO THE OWNER

### *Owner's Copy*

On \_\_\_\_\_, 20\_\_ at \_\_\_\_\_ am/pm, the \_\_\_\_\_ Fire Department has turned the property back over to the owner or the owner's agent. The training session has been completed and the property will become the responsibility of the owner or agent representing the owner. The location of the property is:

911 Address: \_\_\_\_\_

County: \_\_\_\_\_ Township: \_\_\_\_\_

Range: \_\_\_\_\_ Section: \_\_\_\_\_

It will be your responsibility to watch for any unsafe fire conditions that may require the return of the fire department to the property. If this happens, please notify the Fire Department immediately by the 9-1-1 telephone system.

It will be your responsibility to secure people and pets from coming in contact with the remains and the hole in the ground or any unsafe conditions that may harm them in any way.

Thank you for your cooperation.

\_\_\_\_\_ Fire Chief

\_\_\_\_\_ Fire Department

\_\_\_\_\_ Phone

\_\_\_\_\_ Fax

\_\_\_\_\_ Date

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I acknowledge that I am the owner of the property described as follows:

\_\_\_\_\_  
and that the fire department has returned my property to me in a manner that was agreed upon prior to fire training. I understand that I am once again responsible for my property and the proper disposal of the remaining structure.

\_\_\_\_\_ Owner

\_\_\_\_\_ Date

\_\_\_\_\_ Fire Chief

\_\_\_\_\_ Date

FIRE DEPARTMENT COPY

## TRANSFER OF AUTHORITY OF THE PROPERTY BACK TO THE OWNER

### Owner's Copy

On \_\_\_\_\_, 20\_\_ at \_\_\_\_\_ am/pm, the \_\_\_\_\_ Fire Department has turned the property back over to the owner or the owner's agent. The training session has been completed and the property will become the responsibility of the owner or agent representing the owner. The location of the property is:

911 Address: \_\_\_\_\_

County: \_\_\_\_\_ Township: \_\_\_\_\_

Range: \_\_\_\_\_ Section: \_\_\_\_\_

It will be your responsibility to watch for any unsafe fire conditions that may require the return of the fire department to the property. If this happens, please notify the Fire Department immediately by the 9-1-1 telephone system.

It will be your responsibility to secure people and pets from coming in contact with the remains and the hole in the ground or any unsafe conditions that may harm them in any way.

Thank you for your cooperation.

\_\_\_\_\_ Fire Chief

\_\_\_\_\_ Fire Department

\_\_\_\_\_ Phone

\_\_\_\_\_ Fax

\_\_\_\_\_ Date

---

I acknowledge that I am the owner of the property described as follows:

\_\_\_\_\_

and that the fire department has returned my property to me in a manner that was agreed upon prior to fire training. I understand that I am once again responsible for my property and the proper disposal of the remaining structure.

\_\_\_\_\_ Owner

\_\_\_\_\_ Date

\_\_\_\_\_ Fire Chief

\_\_\_\_\_ Date