

DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
REQUEST FOR FIRE MANAGEMENT ASSISTANCE DECLARATION

O.M.B. No. 1660-0058
Expires July 31, 2008

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 1 hour per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. Your response is required to obtain or retain Federal assistance through FEMA's Fire Management Assistance Grant Program. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC, 20472, Paperwork Reduction Project (1660-0058). **NOTE: Do not send your completed survey to the above address.**

1. STATE	2. DATE OF REQUEST	3. TIME OF REQUEST
4. NAME OF GOVERNOR OR AUTHORIZED REPRESENTATIVE	PHONE NO. INCLUDING AREA CODE a. Day b. Night	
5. AGENCY REPRESENTED	ADDRESS (Street, City, Zip)	

NOTE: In making this request, the Government agrees to abide by provisions contained in FEMA-State Agreement for Fire Management Assistance under Section 420, PI 93-288 as amended. This request must be signed below by the Governor personally or by his authorized representative, whom he has previously authorized to sign this request in the FEMA - State Agreement.

6. SIGNATURE	TITLE	DATE
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I. EXISTING CONDITIONS

7. EXISTENCE OF HIGH FIRE DANGER CONDITIONS	a. TEMPERATURE	b. RELATIVE HUMIDITY	c. DIRECTION AND VELOCITY OF WIND
	d. PREVAILING WEATHER CONDITIONS AND PREDICTIONS FOR NEXT 24 HOURS		

8. NUMBER OF WILD FIRES

a. CONTROLLED _____ ACRES BURNED _____ b. UNCONTROLLED _____ ACRES BURNED _____

c. EXISTENCE OF OTHER FIRES NEARBY WHICH LIMITS THE COMMITMENT OF STATE FIRE FIGHTING RESOURCES # _____

d. EXISTENCE OF OTHER FIRES NEARBY THAT MAY RESULT IN A CONFLAGRATION # _____

9. INDICES: <input type="checkbox"/> NATIONAL FIRE DANGER RATING SYSTEM <input type="checkbox"/> OTHER (KBDI, SPI, HAINES, PALMER, ETC.)	10. STATE & LOCAL BURN BANS: <input type="checkbox"/> YES <input type="checkbox"/> NO	11. NATIONAL WATCHES: <input type="checkbox"/> YES <input type="checkbox"/> NO	WARNINGS <input type="checkbox"/> YES <input type="checkbox"/> NO
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II. FIRE SITUATION REPORT

12. TIME OF REPORT	13. NAME OF UNCONTROLLED FIRE	14. DATE
15. LOCATION OF UNCONTROLLED FIRE: (County)	16. ACRES BURNING: a. FEDERAL _____ % b. STATE _____ % c. PRIVATE _____ %	
17. MANPOWER AND RESOURCES COMMITTED (Attach separate sheet if necessary)		
STATE:	LOCAL:	

18. TYPE AND AMOUNT OF FEDERAL OR OTHER ASSETS & RESOURCES NEEDED: (FEMA does not order resources)

III. CURRENT THREAT

19. THREAT TO LIFE: # _____	a. PREPARATIONS MADE FOR EVACUATION? <input type="checkbox"/> YES <input type="checkbox"/> NO	b. PERSONS EVACUATED: # _____
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20. NAME AND LOCATION OF COMMUNITY THREATENED CITY _____ CITY _____ SUBDIVISION _____	ADDITIONAL INFORMATION
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21. CASUALTIES: 1. CIVILIAN LOSS OF LIFE _____ 2. CIVILIANS INJURED _____ 3. FIRE FIGHTERS LOSS OF LIFE _____ 4. FIRE FIGHTERS INJURED _____	22. THREAT TO PRIVATE PROPERTY: (Dwellings) 1. NUMBER OF HOMES _____ a. % OF PRIMARY _____ b. % OF SECONDARY _____
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23. THREAT TO FACILITIES (Include number when applicable)	AMOUNT	TYPE	AMOUNT	TYPE
<input type="checkbox"/> BUILDINGS			<input type="checkbox"/> RECREATION	
<input type="checkbox"/> ROADS & BRIDGES			<input type="checkbox"/> EQUIPMENT	
<input type="checkbox"/> INFRASTRUCTURE			<input type="checkbox"/> BUSINESS	
<input type="checkbox"/> UTILITIES			<input type="checkbox"/> OTHER	
ADDITIONAL INFORMATION				

24. THREAT TO RESOURCES <input type="checkbox"/> WATERSHED <input type="checkbox"/> IRRIGATION <input type="checkbox"/> FLOOD CONTROL <input type="checkbox"/> FISHING STREAMS & SPAWING SITES	 <input type="checkbox"/> WILDLIFE (Type threatened, fur-bearing animals, big game, etc.) <input type="checkbox"/> ENVIRONMENTAL RESOURCES (bio-diverse areas, etc.) <input type="checkbox"/> CULTURAL RESOURCES <input type="checkbox"/> ECONOMIC INJURY
ADDITIONAL INFORMATION	

IV. STATE ASSESSMENT

25. EMERGENCY MANAGEMENT ASSESSMENT OF THE SITUATION	
SIGNATURE	DATE

26. FORESTRY ASSESSMENT OF THE SITUATION	
SIGNATURE	DATE

FOR FEMA REGIONAL USE ONLY

SIGNATURE	TITLE	DATE
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