



FIRE CAMP EVACUATION PLAN

FIRE NAME
INCIDENT NO.

FIRE CAMP	LOCATION OF FIRE CAMP				INCIDENT COMMANDER OR DESIGNATE TO ORDER EVACUATION				
	NUMBER OF PEOPLE IN CAMP	DAY	NIGHT	CAMP MANAGER OR DESIGNATE RESPONSIBLE FOR DAILY UPDATE	RADIO CHANNEL		FREQUENCY		
	STAGING AREA LOCATION								
METHOD OF EVACUATION	BY DAY				Attach map showing evacuation route	BY NIGHT			
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PROCEDURES	ASSIGNED ROUTING PERSONNEL	NAME			ROUTING AREA RESPONSIBILITIES				
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NOTICE	ALERT SYSTEM FOR EVACUATION ORDER (i.e., BLOW HORN 3 TIMES, PAUSE, 3 TIMES, PAUSE, THREE TIMES)				<ul style="list-style-type: none"> ROUTING STAFF: CHECK AREAS OF ASSIGNED RESPONSIBILITIES. EXIT AS SET IN METHOD OF EVACUATION. 				
	<hr/> <hr/>				ADDITIONAL COMMENTS	<hr/> <hr/> <hr/>			
RECEIVED BY ALL PERSONNEL		DATE Y M D	POSTED ON BULLETIN BOARD			DATE Y M D	INITIALS		