



PRESCRIBED BURN ANALYSIS

FILE _____

RESOURCE MANAGEMENT REGION		DISTRICT NO.		MAP REFERENCE			
TENURE	C.P.	BLOCK	PROJECT NAME				
PROJECT NO.	DATE FS 89 PRESCRIPTION SUBMITTED	YYYY - MM - DD	DATE INSTRUCTION LETTER ISSUED	YYYY - MM - DD	DATE TREATMENT COMPLETED	YYYY - MM - DD	
<input type="checkbox"/> LICENSEE <input type="checkbox"/> OWNER <input type="checkbox"/> OPERATOR: _____					ELEVATION		
<input type="checkbox"/> F.S. PROJECT <input type="checkbox"/> OTHER: _____					ASPECT		
TYPE OF PRESCRIBED BURN:	<input type="checkbox"/> BROADCAST BURN	<input type="checkbox"/> BUNCH AND BURN	<input type="checkbox"/> SPOT BURN	<input type="checkbox"/> OTHER: _____	SLOPE	%	
BROADCAST BURN PREDICTION (COMPLETE THIS SECTION ONLY IF BROADCAST BURN IS INDICATED IN SLASH FUELS)							
RECORD OF PRESCRIBED FIRE PREDICTOR READINGS -- FROM PLANNING SIDE II: _____							
PRIME OBJECTIVE OF BURN	DESIRED % REDUCTION	DESIRED IMPACT RANK	EVALUATION OF IMPACT				
<input type="checkbox"/> REDUCE DUFF LAYER							
<input type="checkbox"/> EXPOSE MINERAL SOIL							
<input type="checkbox"/> ELIMINATION OF FUELS							
BURNING CONDITIONS REQUIRED TO MEET DESIRED OBJECTIVES							
IMPACT RANK	DESIRED CONTROL RANK	DROUGHT CODE	DUFF MOISTURE CODE	DESIRED SPREAD RANK	IGNITION RANK	FINE FUEL MOISTURE CODE	CONDITIONS SAT. = x NOT SAT. = x
IF BROADCAST SLASH BURN, COMPLETE THIS SECTION FROM PRESCRIBED FIRE PREDICTOR READINGS (SIDE 1)							
WEATHER CONDITIONS AND DAILY PREDICTOR READINGS ON DAY BURN IGNITED							
DATES OF IGNITION	FINE FUEL MOISTURE CODE	DUFF MOISTURE CODE	DROUGHT CODE	IGNITION RANK	SPREAD CODE	CONTROL RANK	IMPACT RANK
YYYY - MM - DD							
AREA BURNED (SHOW HECTARES COMPLETED)							
FUEL TYPES	BROADCAST	BUNCHED	SPOT	OTHERS	TOTAL		
GRASSES AND VEGETATION							
BRUSH							
LOGGING SLASH							
OTHER FUELS							
TOTALS							

TODAY'S IGNITION STARTED:	M	D	HOUR	TODAY'S IGNITION ENDED:	M	D	HOUR	BY (NUMBER OF CREW)
TODAY'S IGNITION WAS:		TODAY'S SPREAD WAS:			TODAY'S CONTROL WAS:		QUALITY OF BURN WAS:	
<input type="checkbox"/> VERY EASY		<input type="checkbox"/> VERY SLOW			<input type="checkbox"/> VERY EASY		<input type="checkbox"/> VERY POOR	
<input type="checkbox"/> EASY		<input type="checkbox"/> SLOW			<input type="checkbox"/> EASY		<input type="checkbox"/> POOR	
<input type="checkbox"/> DIFFICULT		<input type="checkbox"/> RAPID			<input type="checkbox"/> DIFFICULT		<input type="checkbox"/> SATISFACTORY	
<input type="checkbox"/> VERY DIFFICULT		<input type="checkbox"/> FAST			<input type="checkbox"/> VERY DIFFICULT		<input type="checkbox"/> GOOD	
<input type="checkbox"/> IMPOSSIBLE		<input type="checkbox"/> VERY FAST			<input type="checkbox"/> UNCONTROLLABLE		<input type="checkbox"/> VERY GOOD	
WAS SPOT FORECAST REQUESTED?	<input type="checkbox"/> YES	WINDS (SHOW DIRECTION AND VELOCITY)			WINDS FORECAST	WINDS EXPERIENCED	FORECAST: <input type="checkbox"/> DRYING <input type="checkbox"/> WETTING	
WAS BURNING PLAN CARRIED OUT SATISFACTORILY?	<input type="checkbox"/> YES <input type="checkbox"/> NO	DID AN ESCAPE OCCUR?	<input type="checkbox"/> YES <input type="checkbox"/> NO	SIZE OF ESCAPE: _____ ha	IF ESCAPE OCCURRED, SHOW FIRE NAME _____ NUMBER _____			
PRESCRIBED BURN OBJECTIVES:								
WERE OBJECTIVES ACHIEVED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IS AREA READY FOR PLANTING?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IS AREA READY FOR NATURAL REGENERATION?	<input type="checkbox"/> YES <input type="checkbox"/> NO			
COST SUMMARY INCLUDE ALL PREPARATION, LIGHT-UP, CONTROL AND ADMINISTRATION COSTS. DO NOT INCLUDE COST OF CONTROLLING ESCAPES. THESE COSTS ARE SHOWN IN THE FINAL FIRE REPORT. AVGE. COST PER ha: \$ _____				COST OF BURNING (SHOW DOLLAR VALUE)				
				AGENCY	BROADCAST	BUNCHED	SPOT	OTHER
INDUSTRY								
F.S.								
F & W								
NOTE: IN THE EVENT ACTUAL COSTS DIFFER SERIOUSLY FROM ESTIMATED COSTS SHOWN IN PRESCRIPTION, PLEASE COMMENT BELOW:				OTHERS				
				TOTALS				
REMARKS AND RECOMMENDATIONS								
PLEASE COMMENT ON ANY UNUSUAL OR UNEXPECTED PROBLEMS ENCOUNTERED IN CARRYING OUT THE PRESCRIPTION, REGARDING WEATHER, GROUND CONDITIONS, FIRE CONTROL, ETC.								
DID THE OPERATOR COMPLY WITH PLANS AND INSTRUCTIONS?				DO YOU CONSIDER THE ECOLOGICAL IMPACT TO BE IN ANY WAY DETRIMENTAL?				
<input type="checkbox"/> YES <input type="checkbox"/> NO IF NOT, WHY NOT?				<input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE EXPLAIN.				
FIELD OFFICER'S SIGNATURE							DATE YYYY - MM - DD	
HAVE MYLAR MAPS AND HISTORY CARDS BEEN UPDATED?		<input type="checkbox"/> YES <input type="checkbox"/> NO	SKETCH MAP ATTACHED?		<input type="checkbox"/> YES <input type="checkbox"/> NO	DISTRICT MANAGER'S SIGNATURE		
APPROVALS								
SILVICULTURE					PROTECTION			
ZONE FORESTER'S SIGNATURE					REGIONAL MANAGER'S SIGNATURE			