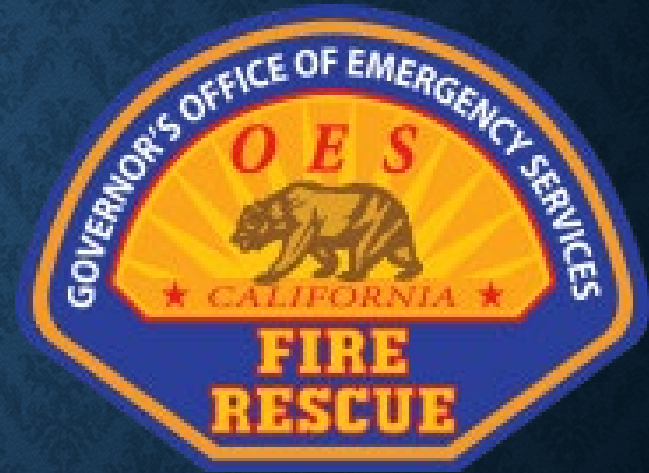
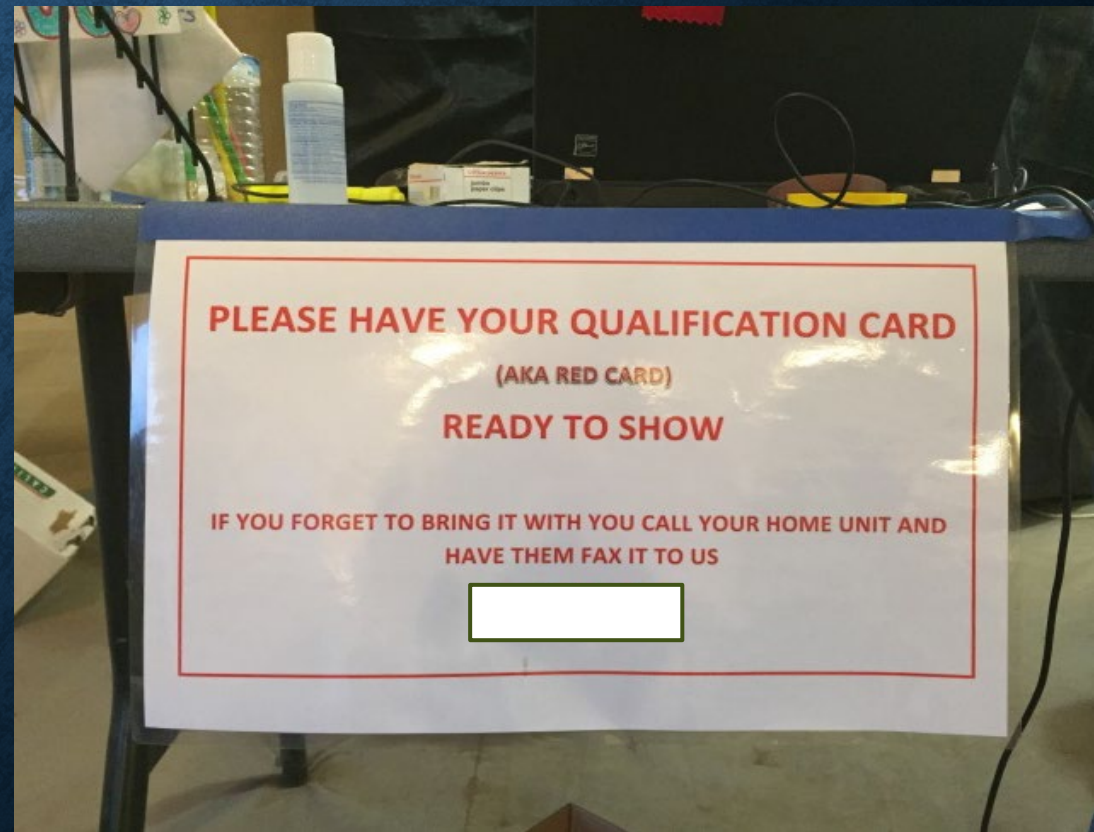


**STRIKE TEAM LEADER,
SINGLE RESOURCE &
OVERHEAD REFRESHER 2024**



WE EXPECT YOU TO....

- Gather Dispatch Information
- CICCS Qualification
- Determine Urgency
- Attempt to fill STEN Trainee
- "Flight Following" with Operational Area
- Daily "SIT STAT" with Home Operational Area



STRIKE TEAM/ TASKFORCE LEADER

A Trainee is approved though the CFAA”. Vehicles are not approved in the terms and conditions of CFAA.

If an OA does not have trainee (T) please reach out to a neighboring OA or Region to fill... we have several trainees that need to get out.



DETERMINE URGENCY

- Response Modes
 - Initial Attack
 - Just like receiving a 911 call
 - Immediate Need
 - 30-minute response expectation
 - Planned Need
 - 1 hour response expectation



THIS IS ON YOU!

**IT IS THE RESPONSIBILITY OF THE
OVERHEAD*/STEN/TFLD TO ALWAYS
KNOW WHICH AGREEMENT WAS USED
FOR YOUR REQUEST AND WHAT
MISSION (WHO PAYS) YOU WERE
REQUESTED FOR!**

AGREEMENTS

- Master Mutual Aid (MMA) – no reimbursement - no time limit (MARS (F-42) documentation only)
California Fire Assistance Agreement (CFAA) – (12 hrs free, DOI and BIA 4 hours free) – MARS (F-42)
- Local Forest Agreement (LFA or ABH)
Whatever you agreed to
FC-33 (Cal Fire) or FSLA-5 (Federal)

This box shows your financial code

RESOURCE ORDER	Initial Date/Time	2. Incident / Project Name				3. Incident / Project Order Number CA-SQF-002385		Financial Codes P5LA1W (0513) [P] CFAA - CA FIRE ASSIST AGR CMA - CAL FIRE MUTUAL AID LA1W		
OVERHEAD	08/29/17 0203	PIER				4. Office Reference Number		9. Jurisdiction / Agency Sequoia National Forest		
5. Descriptive Location 42400 HWY 190 ,SPRINGVILLE		6. TWIN	RNG	SEC	Base MDM	8. Incident Base / Phone Number EXPANDED - OVERHEAD 559-782-3120 x 745 559-781-5780 EXPANDED - EQUIP/SUPPLY 559-782-3120 x 742, 743 CESAR TORRES 559-359-9215 CCICC 24 HR EMERGENCY 559-781-5780 EXPANDED - CREWS 559-782-3120 x 744		10. Ordering Office Central California ECC		
		205	30E	28	Mt. Diablo, CA					
		LAT. 36 09 12 N								
		LONG. 118 44 26 W								

11. Aircraft Information							
Bearing	Distance	VOR	Contact Name	Frequency Type	Assigned Frequency	Reload Base	Other Aircraft / Hazards
29	20	TTE		Air to Air	125.5250	FAT	
95	38	VIS		Tactical	166.7750	PTV	
11	44	EHF		Tactical	168.6000		
				Air Tactics	167.6250		
				Tactical	168.0500		
				Air to Ground	169.1500		
				Tactical	166.7250		
				Command	RX 170.5500 TX 166.0000 103.50		

This box shows all available financial codes

12. Request Number	Ordered Date/Time	From	To	Qty	Resource Requested	Needed Date/Time	Deliver To	From Unit	To Unit	Assigned Date/Time	Resource Assigned Unit ID	Resource Assigned	M/D Ind	Estimated Time Of Departure	Estimated Time Of Arrival	Released Date	Released To
O-268	09/02/17 1338 PST	EXPANDED - OVERHEAD 559-782-3120 x 745	CA-CCCC	1	RADIO OPERATOR (RADIO) (Teasdale, Steven P (CA-XORC)) (T-A)	09/03/17 0600 PST	42400 HWY 190 ,SPRINGVILLE	CA-XORC	CA-CCCC	09/02/17 1616 PST	CA-HTB	Teasdale, Steven P (CA-XORC)	D	09/18/17 1200 PST	09/18/17 1900 PST	09/17/17 1802 PST	JOHN WAYNE AIRPORT-ORANGE COUNTY (SNA)
Travel Mode		Financial Code CFAA - CA FIRE ASSIST AGR				Special Needs OES NAME REQUEST. CELL PHONE, LAPTOP, 4X4 RENTAL, AOV AUTHORIZED				Reporting Instructions VISALLIA MARRIOTT 300 SOUTH COURT ST. VISALLIA, CA 93291							

13. User Documentation		
Req. No.	Documentation	Entered By
O-268	NAME REQUEST, PLACING UP TO PARENT	TAMMY HILL (CA-XTUC)

PIER	CA-SQF-002385
------	---------------

THE CALIFORNIA FIRE ASSISTANCE AGREEMENT (CFAA)



- USFS



- FWS



- NPS



- CAL FIRE



- BLM



- Cal OES



- BIA

CA FIRE ASSISTANCE AGREEMENT

- Workers' Compensation
 - Liability for workers compensation claims and/or payment of unemployment benefits shall remain the responsibility of the responding local, state, federal, and tribal agencies that directly employ the personnel
 - Your workers compensation follows you to your assignment. If you are injured at the incident, you must file a workers compensation claim with your employer



CFAA

Reimbursement - Travel Expenses:

Exhibit H

- Reimbursement for travel expenses such as fuel, food, and lodging **while assigned at incident must be approved in writing by the incident.**
- Meals and incidentals not provided by the incident on the **first and last travel** days are reimbursable. (No documentation required)
- Fuel to and from incident is not reimbursable
- Lodging while traveling to and from incident needs prior approval

Lodging Rate

\$184.00

Reimbursed up to a ceiling of 150%

Meal and Incidental Rates

Breakfast	\$17.00
Lunch	\$18.00
Dinner	\$34.00
Incidentals	\$5.00

CFAA

- Reimbursement – Approved Personnel Rotation: Personnel under this agreement are expected to be available a minimum of 7 days (portal to portal) excluding travel, before needing replacement, regardless of the number of assignments from original dispatch.
- *Most Operational Areas have agreed to a 14 day commitment on assignments exclusive of travel.*

PERSONNEL ROTATIONS

If a OES AREP is on scene, all crew rotations should start with them.

Crew rotation process should start at least 48hrs prior to the request date.

All crew rotations will happen when units are on an OFF status.

APPROVED PERSONNEL ROTATIONS

- The personnel rotation and transportation plan must be coordinated through the incident, the ordering point, agency representative, and/or the overhead responsible for the personnel to be rotated

APPROVED PERSONNEL ROTATIONS

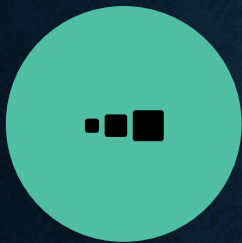
Rotations will be documented on the Resource Rotation – Job Aid (v9) which will be signed by the IC through the OES AREP.

The Incident Commander or MOB Center Mgr. to which the resources are assigned must approve the personnel rotation and method of transportation. *Such approval should not be denied without substantial cause. (Imminent planned release 24-36 hours or a negotiated extension through the OES AREP).*

APPROVED PERSONNEL ROTATIONS

- If the home agency/s will be using a commercial bus for the movement of personnel for the rotation, the cost for the bus must be approved. *(when submitting your request for rotation, you will need to provide a estimate for the bus cost for approval)*

APPROVED PERSONNEL ROTATIONS



Crews coming off shift will be required to rest prior to departing the incident (safety reason)



The exception would be if drivers were sent and/or a commercial bus was used

RENTAL CAR



Rental agreements are between Local Government Fire Department and the rental car company.



Ensure rental car is noted and approved on IROC order form

RESOURCE ORDER	Initial Date/Time	2. Incident / Project Name				3. Incident / Project Order Number CA-SQF-002385		Financial Codes P5LA1W (0513) [P] CFAA - CA FIRE ASSIST AGR CMA - CAL FIRE MUTUAL AID LA1W	
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		20S	30E	28	Mt. Diablo, CA				
		LAT. 36 09 12 N							
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Bearing	Distance	VOR	Contact Name	Frequency Type	Assigned Frequency	Reload Base	Other Aircraft / Hazards										
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				Command	RX 170.5500 TX 166.0000 103.50												

12. Request Number	Ordered Date/Time	From	To	Qty	Resource Requested	Needed Date/Time	Deliver To	From Unit	To Unit	Assigned Date/Time	Resource Assigned Unit ID	Resource Assigned	M/D Ind	Estimated Time Of Departure	Estimated Time Of Arrival	Released Date	Released To
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13. User Documentation																	
Req. No.	Documentation															Entered By	
O-268	NAME REQUEST, PLACING UP TO PARENT															TAMMY HILL (CA-XTUC)	

PIER	CA-SQF-002385
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Contact Information

Contract Questions:

Lisa Holmes

State of CA Account Manager

916-787-4733

Lisa.M.Holmes@ehi.com

General Account Questions:

Julie Lindberg

Business Rental Account Representative

916-787-4763

Julie.A.Lindberg@erac.com

INCIDENT OFF-SHIFT REST & SLEEPING ACCOMMODATIONS

- The responsible Forest Agency will provide, **when practical**, shaded and/or climatically maintained accommodations for off shift sleeping, rest, and recuperation for local government resources confined to incident base
- If the Incident Command finds it operationally **feasible** (i.e. Strike Team remains available), to place local government resources in a commercial sleeping accommodation, it may be provided by the forest agency

INCIDENT OFF-SHIFT REST & SLEEPING ACCOMMODATIONS



Local government and OES engines staffed by CAL FIRE personnel fall under the provisions of the CFAA



Never split up the strike team



Utilize the OES and CAL FIRE AREP to resolve issues



MOTEL GUIDELINES

- CHECK IN with CAL FIRE Motel Manager upon arrival at the ICP, provide current personnel count (male/female), along with your Strike Team ID and phone numbers.
- When placed in accommodations, you are ON DUTY – UNASSIGNED.
- DO NOT change room allocations (i.e. doubles to singles).
- ALL individuals are required to sign motel roster daily. Form AQ-341
- Meals will be provided at the Incident Base unless specifically directed by the incident. If you choose to eat off site it is your responsibility and not reimbursable.
- Telephone calls, pay-per-view television, room service, etc. from rooms are NOT AUTHORIZED.
- Crew Rotations: If the number or makeup of personnel in your strike team changes, advise Motel Unit Leader and update phone numbers.



RESTAURANT/MOTEL NAME: Comfort Inn

DATE: 5/22/08 INCIDENT NAME: Summit

FIRE NUMBER: _____ INCIDENT NUMBER: CA SCU 002548

CALCARD (Holder Name: Print) _____ PAGE 1 OF 2
Reference DPA Rule: 599.0220, 599.0230

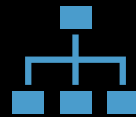
NAME (Please print)	REQUEST NO.	STATION/CREW #	ROOM #	SINGLE ROOM	DOUBLE ROOM	SIGNATURE
1. RANDY TITUS	E30-2	OES ST 2804A	216	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
2. STEVE Prziborawski	E30-2	OES ST 2804A	216	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
3. Sam Klemek	E30-2	OES ST 2804A	114	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
4. John Reel	E30-2	OES ST 2804A	114	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
5. Carl Lemos	E30-2	OES ST 2804A	211	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
6. Eric Walker	E30-2	OES ST 2804A	211	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
7. Dennis Lollie	E30-2	OES ST 2804A	217	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
DAVID MAYFIELD	E30-2	OES ST 2804A	217	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
9. Alex Valcazar	E30-2	OES ST 2804A	218	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
10. CARL BETTE	E30-2	OES ST 2804A	218	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
11. Richard Smith	E30-2	OES ST 2804A	233	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
12. Jeff Tucker	E30-2	OES ST 2804A	233	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
13. John Ruskell	E30-2	OES ST 2804A	235	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
Kandy Sanchez	E30-2	OES ST 2804A	235	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
15. Chris Handley	E30-2	OES ST 2804A	104	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
16. Jeff James	E30-2	OES ST 2804A	104	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
17. Martin Casarez	E30-2	OES ST 2804A	203	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
18. Scott Anderson	E30-2	OES ST 2804A	203	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
19. Russ Garcia	E30-2	OES ST 2804A	223	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]
MATT DUTCHER	E30-2	OES ST 2804A	223	<input type="checkbox"/>	<input checked="" type="checkbox"/>	[Signature]

- Each person occupying rooms must sign the CAL FIRE AO-341 (blue ink) so the bill can be paid.
- Remember that you are still on the clock, representing your department and OES.
- Mistakes and errors in judgment you make here will impact the entire California Fire Service.

FISCAL RESPONSIBILITY



A typical Engine Strike Team runs from \$35,000 to \$55,000 per 24-hour period.



If you were a business, how accountable would you be for these expenses?



The F-42 is the reimbursement document for this revenue.

TIME UNIT



Check with
the OES
AREP for
process



If **NO** OES
AREP

Be sure to get
your MARS
(F-42) signed
by the
incident
authorized
representativ
e. (***you will
NOT have
gold copy to
take home***),
**you will
receive an
email copy**



Keep your
paperwork
current

MARS F-42

AgencyInfoPage x +

engage.caloes.ca.gov/mars/s/agencyinfolpage?id=001t000000jcEHLAA2

IRS-001 Incident Re... Inside Cal OES Wha... New Tab Settings Google Sheets Geographic Informa... https://rossinstaller... 2020 FDC LOG - Go... All Bookmarks

Agency Profile **F-42 Entries** F-42 Review Expense Claim Expense Claim Review Invoices

EMERGENCY ACTIVITY RECORD (OES F-42)

- 1-4. Agency/Incident**
- 5. Dispatch Information
- 6. Dispatched From
- 7. Redispached To
- 8. Overhead
- 9-10. Support Vehicle Information
- 11. Equipment Resource Information
- 12-13. Personnel Information
- 14. Comments
- 15-16. Supply Number
- 17. Responding Agency Information

Please Access F-42 Instructions Here Please Access FAQs Here **Save and Next** **Save Draft** **Close**

1-4. AGENCY/INCIDENT

***1. AGENCY DESIGNATOR**
CA-OES

SEARCH AGENCY
SELECT/CHANGE AGENCY

***2. RESOURCE TYPE**
Select Resource Type

***3. INCIDENT ORDER NUMBER**

***SEARCH INCIDENT**
SELECT/CHANGE INCIDENT

***4. INCIDENT REQUEST NUMBER**
A-12345678

Type here to search

40°F 5:39 PM 2/15/2024

F-42/MARS COMMENTS

- Ensure these items are noted in the comments section:
 - Approved Personnel Rotation
 - Assigned / Re-assigned
 - Comp/Claims notations

Don't confuse block 14 (comments) on the F-42 with your ICS 214 Unit Log

F-42

COMMENTS

- Use your ICS 214 to document the daily events of your deployment
 - Accidents
 - Significant events
 - Actions - assignments

MARS Travel Expense Claim

AgencyInfoPage

engage.caloes.ca.gov/mars/s/agencyinfolpage?id=001t000000jcEHLAA2

IRS-001 Incident Re... Inside Cal OES Wha... New Tab Settings Google Sheets Geographic Informa... https://rossinstaller... 2020 FDC LOG - Go... All Bookmarks

Add Row

DATE	PER DIEM (Must indicate the number of people in the description, one line per day.)	LODGING	MISC	DESCRIPTION	TOTAL AMOUNT	ACTION	
Aug 29, 2023	<input checked="" type="checkbox"/> Breakfast <input checked="" type="checkbox"/> Lunch <input checked="" type="checkbox"/> Dinner	\$112.00	\$0.00	\$0.00	test	\$112.00	
Aug 22, 2023	<input checked="" type="checkbox"/> Breakfast <input checked="" type="checkbox"/> Lunch <input checked="" type="checkbox"/> Dinner	\$112.00	\$27.00	\$150.00	Fuel not provided t	\$289.00	
Aug 25, 2023	<input checked="" type="checkbox"/> Breakfast <input checked="" type="checkbox"/> Lunch <input checked="" type="checkbox"/> Dinner	\$112.00	\$0.00	\$0.00	test	\$112.00	
Sub Totals		\$336.00	\$27.00	\$150.00	Total	\$513.00	

COMMENTS

* PLEASE SIGN HERE

* DATE

Aug 24, 2023

* PRINTED NAME

test

Reset

Attach File

Type here to search

62°F

4:58 PM 2/15/2024

COMPENSATION/CLAIMS “S” NUMBER PROCESS

Damage to apparatus, equipment, hose left on the line, hose burned, etc. of items that may be involved in this process (if issue can't be resolved by Supply)

There are steps that need to be followed to ensure that you are compensated for these losses

Failure to complete these processes will very likely result in a denial

Comp Claims Checklist

Process

1. Fill out General Message ICS 213.
(details of accident/loss on an ICS213 signed by appropriate chain of command)
2. Contact the AREP for assistance and information.
3. Gather photographs, witness statements, police reports, damage estimates, and other information.
4. Ensure that cost of damage is reflected as an estimate and is non-exclusive.
5. Complete appropriate forms (listed below).
6. Submit forms, photos, and information to the OES AREP.
7. Three copies of all documents generated (Home Agency, OES AREP, Incident Comp Claims).
8. Obtain Supply Number (S #) from the incident.
8. Home Agency submits receipts for reimbursement to Cal OES.

Required Documents

- California DGS - STD 270 – Vehicle Accident Report.....
<http://police.sdsu.edu/dps/images/std270.pdf>
- State Incident: Cal Fire 101 – Property Certification / Certificate of Responsibility }
or <http://jerlong.com/files/cdf101.doc>
- Federal Incident: NIFC OF289 – Property Loss or Damage Report }
http://gacc.nifc.gov/nwcc/content/pdfs/dispatch/Jada/OF_289.pdf
- Police Report.....
- Narrative (from ICS 214 – Unit Log).....
<http://www.firescope.org/ics-forms/ICS%20214.doc>
- Witness Statements.....
- Photographs (full 360 of vehicle, serial plate, as well as specific damage photos) emailed to AREP.....
- GPS coordinates where incident occurred: _____

**COMP/CLAIMS
PROCESS
START WITH THIS
CHECKLIST!**

CFAA

- Reimbursement - Emergency Apparatus Loss or Damage:
 - The State of California and the Federal Fire Agencies may reimburse local government fire agencies for the cost of emergency apparatus or equipment loss or damage where the loss or damage is directly attributable to the incident and where the local agency, its employees and/or operational failures in the emergency apparatus or support equipment are not a contributing factor to such damage or loss.
 - Loss or damage to a local agency emergency apparatus or support equipment while traveling to or from an incident and repairs due to normal wear and tear or due to negligent or unlawful operation by the operator shall be the responsibility of the local agency providing the emergency apparatus or equipment

STATE VEHICLE ACCIDENT REPORT STD FORM 270

State Vehicle Accident Report (STD-270) this form can be located on the DGS website under forms

Description of damages

Narrative and diagram of the accident

Assignee should request police report if needed. (Injuries or damage over \$500.00 per state vehicle code.)

If on assignment, notify Strike Team Leader and Liaison, including Safety Officer for additional documentation.

Report needs to be received by Cal OES Fire and Rescue Division within 48 hours

SHOP STOCK			ROUTING		FORESTRY MOBILE EQUIPMENT WORK ORDER		No. 231926	
DESCRIPTION	UNIT COST	COST	WRITE - ADM UNIT	FOR - ADM UNIT	FOR - ADM UNIT	FOR - ADM UNIT	FOR - ADM UNIT	FOR - ADM UNIT
3x3 SCRATCH REPAIR		700						
TOTAL			REGION _____ ADM. UNIT <u>310</u> DATE <u>12/11/17</u> MFG. <u>HME</u> YR. MODEL _____ TYPE <u>I</u> CHASSIS NO. _____ ENG. TYPE AND NO. _____ LICENSE NO. <u>119579</u> CAL FIRE NO. <u>X</u> MILEAGE <u>52744</u> WORK AUTHORIZED BY <u>JOSH ZEEB</u> TITLE <u>CAPTAIN</u> <u>VIN# 49KFT12865W220550</u> DESCRIPTION OF WORK <u>ASSIGNED TO HOT SPRINGS GROUP ON 12/10/17 @</u> <u>1100. 005310 WAS MAKING A SHARP TURN INTO</u> <u>A DRIVWAY AND CROSSED A CURB AND HIT</u> <u>THE DRIVE. THE DRIVER WAS APOLOGETIC ON</u> <u>THE PASSENGER SIDE. THE DAMAGE WELDED ON</u> <u>THE PASSENGER SIDE LOWER REAR OF CAB.</u> <u>PLZ DO FOLLOWING</u> <u>CONTACT CHIEF D. STONE !!</u> <u>NEED SH</u> <u>EST</u> <u>APPROVE BY CES</u>					
TIRES			LABOR RECORD					
BATTERIES			FEM					
LUBRICANTS			HEM					
AUTO. TRANS. FLD. - QTS.			HFEO					
GEAR OIL - PTS.			CAPTAIN					
			ENG.					
			TOTAL HRS					
			DATE COMPLETED <u>12/11/17</u>		INSPECTED BY <u>[Signature]</u>			

**REQUIRED DOCUMENTATION
 FROM GROUND SUPPORT**

COMP/CLAIM S PROCESS

- Complete formal documentation
 - Accident Report STD Form 270
 - Complete including diagrams, statements, witnesses
 - ICS Form 213
 - Describing event or circumstance
 - Signed by DIVS, Branch or immediate supervisor
 - Photos
 - Include plate, vin plate, door logo, damage
 - Date and time stamped helps
 - On thumb drive for electronic distribution

ICS 213 FORM EXAMPLE

- Don't wait!
- Get your Division or
- Branch to sign this before
- you leave the line

IF WE CAN'T READ IT NIETHER CAN COMP/CLAIMS, SO MAKE IT LEGIBLE!

GENERAL MESSAGE		
TO: Comp/Claims	POSITION:	
FROM: Name	POSITION:	
:	Capt/Sten/Div or BR	
SUBJECT: Department & Engine #	DATE:	TIME:
\$# for Repairs or Replacement		
MESSAGE:		
Who: Engine #, License Number, Strike Team designator Etc.		
When: Day Shift, Night Shift, Date, Time, On shift- off shift		
Where: Be Specific! (E.G. Division X of the Thomas Fire on Hwy #162 at the intersection of Hwy #150) Were you on pavement, dirt, dozerline, driveway?		
How: What happened? Spell it out, Tie it into the activity you were doing (E.G. structure protection, hoselay, firing operation, staged, patrol)		
What: What is the issue? (mirror, fires, bumper, burned hose etc ,mechanical)		
(You sign this and Division or Branch Sign it, include phone numbers)		
SIGNATURE:	POSITION:	
REPLY:		
The reply should be either approved or denied!		
<ul style="list-style-type: none"> • If approved the \$# should be here and the signature of the FSC, IBA or IC • If denied it should document the reason for the denial and signature of who denied it! 		
DATE:	TIME:	SIGNATURE/POSITION:

COMP/CLAIM S PROCESS

- Exhibit “H” (cont.)
 - The formal approval must be DOCUMENTED on a General Message Form ICS-213 and Resource Order of the associated “S #” validating the expense(S)
 - The General Message Form ICS-213 MUST be signed by the Finance Section Chief, Incident Business Advisor, or the Incident Commander
 - **NOTE:** S#’s should ONLY be issued when the incident cannot accommodate the expense and all other options to provide the expense(s) has been exhausted.

COMP/CLAIM S PROCESS

- Complete formal documentation (cont.)
 - Complete agency specific Comp/Claim form (Federal, State)
 - Different forms for different agencies and some require their specific form

COMP/CLAIM S PROCESS

- How to you validate whether your claim is covered?
 - CFAA Page 6 and 7; #25 thru #28
 - “Reimbursement for Emergency Apparatus Loss or Damage
 - CFAA Exhibit “H”
 - “In-State Travel and Incident Related Expenses”
 - Check with the OES AREP
 - 916-845-8911 Duty Officer

COMP/CLAIM S PROCESS

- Exhibit “H”
 - For your agency to be eligible for reimbursement of expenses related to this exhibit, the approval **MUST** be formally documented in writing by the approving State or Federal Agency responsible for said incident.

ICS Form 213

**OTHER
REIMBURSEMENTS
THRU THE
F-42 PROCESS**

- *Any incident approved expense.*
 - Example: Motels approved to finish your travel leg home.
 - Must have copies of all documentation from the incident.
 - Must attach receipts and documentation to the MARS Travel Expense Claim so the invoice can reflect the expenditure.

IWI - NOTIFICATIONS

- Division/Group Supervisor
- INCIDENT SAFETY OFFICER
- Home Agency
- OES AREP
- COMP/CLAIMS

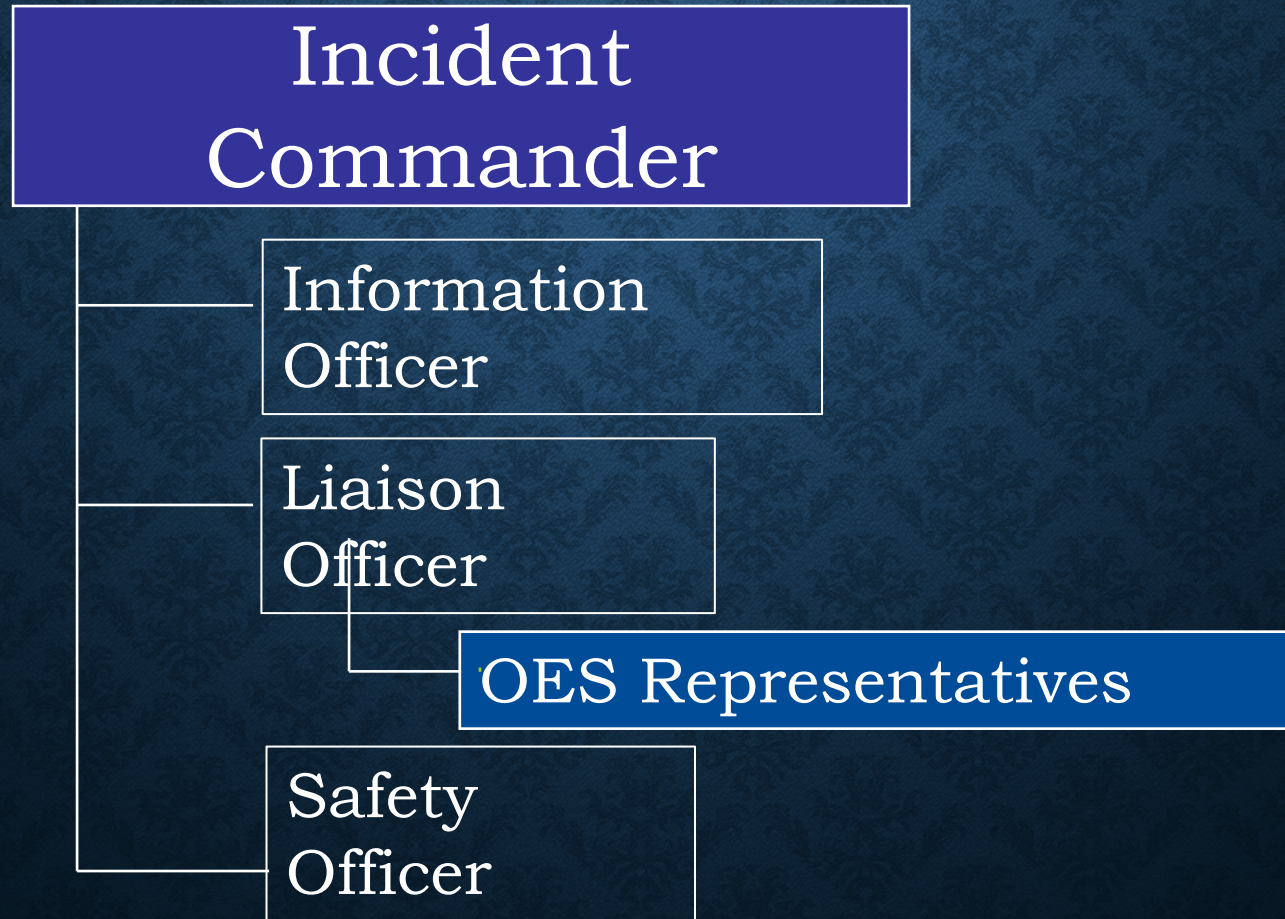
Operational vs. Administrative/Paperwork



**OES
SUPPORT
UNIT
THIS MEANS
WE WILL BE
HERE FOR
AWHILE**

EXPECTATIONS AT INCIDENT BASE

What to do if you have problems



OES RELEASE PRIORIT

0800 XAL 2000C
XCC 2025C
OES 2801

0900 OES 2803
OES 2804
OES 4800

1000 OES 4801
OES 5800
OES 5801

1100 OES 6820
XSD 6430
OES 6801

1200 OES 1802
OES 1800
XLG 1360

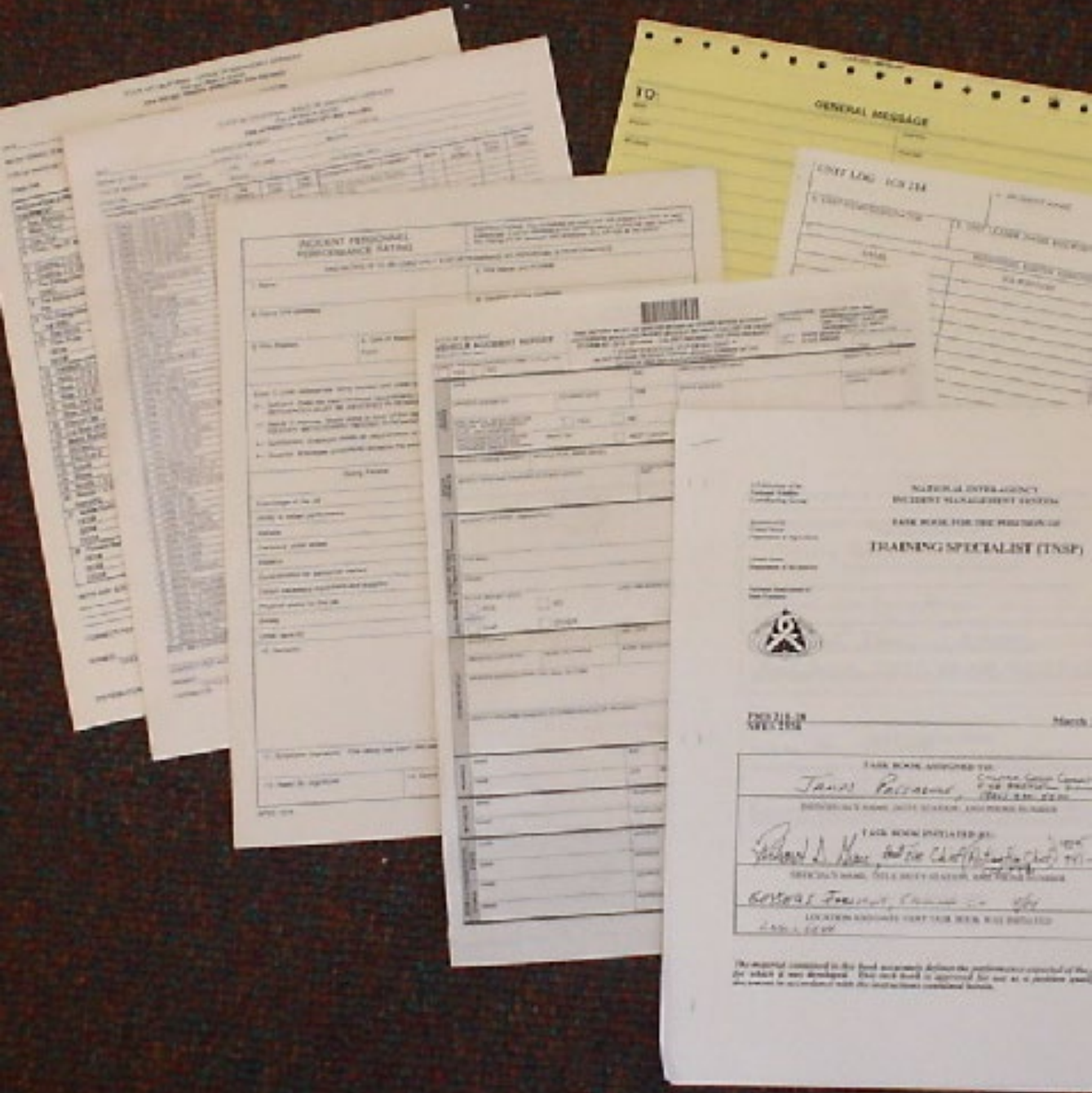
1330 XLC 1201
XLE 1283

TENTATIVE DEMOB @ 1330 H

XMY 2175
XSD 6418
LFD 1002

DEMOBILIZATION

- Be familiar with the demob plan
- The ICS Form 221 starts the release process
- Follow the steps
- Don't shortcut, be prompt, be patient
- MARS time is last
- Once ICS Form 221 is complete, your status is pending until released or reassigned



OTHER DOCUMENTATION

- Task Books
- ICS-225
 - Yourself
 - Company Officers
- Inventories
- STD Form 270



Cal OES Fire & Rescue Division Regional Assistant Chief Map



Region III – Assistant Chief - North
Rick Young
Cell: (916) 541-3165
E-mail: ricky.young@caloes.ca.gov

Region III – Assistant Chief - South
Vacant
Cell: TED
E-mail: TED

Cal OES Fire & Rescue Division
Sacramento Headquarters
3650 Schriever Avenue
Mather, CA 95655
Fire & Rescue Division: (916) 845-8711
Nights & Weekends: (916) 845-8911
FAX: (916) 845-8396

State Fire and Rescue Chief

Brian S Marshall
brian_marshall@caloes.ca.gov
FIRE OPERATIONS NORTH
Deputy Chief – Sam Marouk
sam.marouk@caloes.ca.gov
FIRE OPERATIONS SOUTH
Deputy Chief – Art Torrez
art.torrez@caloes.ca.gov
FIRE ADMINISTRATION
Deputy Chief – Lori Lopez
lori.lopez@caloes.ca.gov
FLEET OPERATIONS
Deputy Chief – Mitch Higgins
mitch.higgins@caloes.ca.gov
SPECIAL OPERATIONS/ HAZ-MAT
Deputy Chief – Larry Collins
larry.collins@caloes.ca.gov
Assistant Chief – Chuck Tobias
chuck.tobias@caloes.ca.gov
Assistant Chief – Jeff Dapper
jeff.dapper@caloes.ca.gov
Assistant Chief – Jeff Adams
jeff.adams@caloes.ca.gov
Assistant Chief – Vacant



Region IV – Assistant Chief - North
Corey Zander
P.O. Box 10673, Truckee, CA 96162
Office: (916) 712-8771 Fax: (916) 845-8396
Cell: (916) 712-8771 E-mail: corey.zander@caloes.ca.gov

Region IV – Assistant Chief - South
Eric Petterson
Cell: (916) 634-8488
E-mail: eric.petterson@caloes.ca.gov

Region V – Assistant Chief - North
Van Arroyo
35370 Road 274, North Fork, CA 93843
Office: (916) 769-1486 Fax: (916) 845-8396
Cell: (916) 769-1486 E-mail: van.arroyo@caloes.ca.gov

Region V – Assistant Chief - South
Javier Lara
P.O. Box 3492, Pinedale, CA 93650-3492
Office: (559) 412-1016 Fax: (916) 845-8396
Cell: (559) 412-1016 E-mail: javier.lara@caloes.ca.gov

Region II – Assistant Chief - North
Ryan Wakefield
Cell: (916) 704-3445
E-mail: ryan.wakefield@caloes.ca.gov

Region II – Assistant Chief - South
Mark Courson
534 Clyne Court, Benicia, CA 94510
Cell: (916) 261-4484
E-mail: mark.courson@caloes.ca.gov

Region I – Assistant Chief - North
Jimmy Harris
Cell: (279) 224-5918
E-mail: james.harris@caloes.ca.gov

Region I – Assistant Chief - South
Greg McKeown
Cell: (916) 208-2525
E-mail: gregory.mckeown@caloes.ca.gov

Region VI – Assistant Chief - North
Randy Unkovich
23300 Castle Street, Riverside, CA, 92518
Office: (951) 278-8725
Cell: (909) 451-1835 E-mail: randy.unkovich@caloes.ca.gov

Region VI – Assistant Chief - South
Tony Rouholas
840 Terrace Circle, Brawley, CA 92227
Office: (760) 825-8400 Fax: (916) 845-8396
Cell: (760) 825-8400 E-mail: tony.rouholas@caloes.ca.gov

**CAL OES
ASSISTANT
CHIEFS**

Region I Greg McKeown
(916) 208-2525

Region I James Harris
(279) 224-5918

Region II Ryan Wakefield
(916) 704-3445

Region II Mark Courson
(916) 281-4484

Region III Rick Young
(916) 541-3165

Region III vacant

**CAL OES
ASSISTANT
CHIEFS**

Region IV Corey Zander
(916) 712-6771

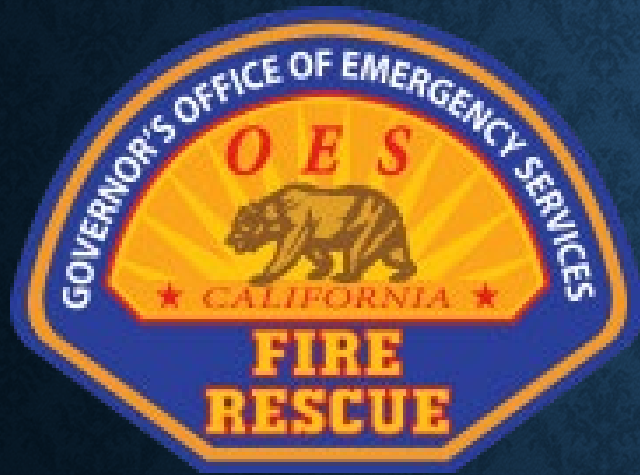
Region IV Eric Petterson
(916) 634-8498

Region V Van Arroyo
(559) 908-0113

Region V Javier Lara
(559) 412-1016

Region VI Tony Rouhotas
(760) 925-8400

Region VI Randy Unkovich
(909) 451-1835



MARS



MARS

Mutual Aid Reimbursement System

SIGN UP LINK

<https://engage.caloes.ca.gov/s/login/>



CFAA and submit F-42s and expenses in the field upon incident demobilization.

STEP 1: Visit the MARS webpage at <https://engage.caloes.ca.gov/s/login/>.

STEP 2: At the bottom of the sign in box, select Sign Up.

Sign In

Email Address

Password

Log In

[Forgot Password?](#)

[Not a member? Sign Up](#)

STEP 3: Complete the required fields and make sure you are selecting Fire Agency in the Entity Type dropdown.

Sign Up

First Name

* Last Name

* Email

* Phone

* Entity Type

* Fire Agency

Select: FIRE AGENCY

STEP 4: The system will send you an email to verify your account. Select the link provided within the email to set up a password.

From: No Reply - Cal OES <noreply@caloes.ca.gov>
Date: Fri, Oct 15, 2021 at 10:54 AM
Subject: Sandbox: Validate your registration
To:



Hi,

Please validate your portal registration by clicking on below link:

<https://ga-caloes.cs33.force.com/s/user-validation?token=NuJst211r8pRMvWPt0UquEXiFdEp3D>

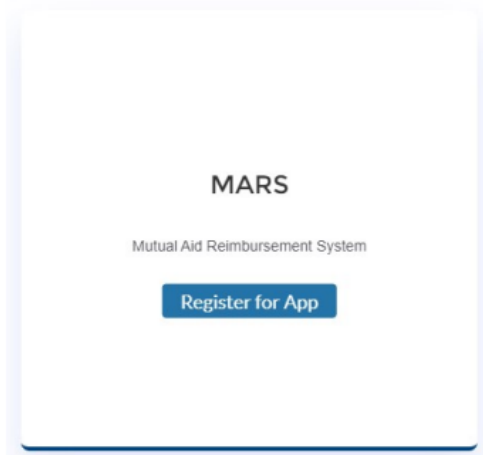
Sincerely,
California Governor's Office of Emergency Services

Enter Password

* Enter Password

* Confirm Password

STEP 5: Now that you have access to the platform you will need to request access to the application. Hover over the MARS logo and select Register for App.



STEP 6: Once you have determined the access level, make the appropriate selection to Request Primary Access or Request Secondary Access.

STEP 6: Once you have determined the access level, make the appropriate selection to Request Primary Access or Request Secondary Access.

Request for MARS App

FirstName
LastName
Email
Phone
Entity Fire Agency
Organization Gov's Office of Emergency Services

Primary Access
Primary Access is for personnel responsible for the agency's reimbursement including submittal of rates.

Secondary Access
Secondary Access is for responding personnel that submit F-42s and travel only.

Request Primary Access Request Secondary Access

STEP 7: Once your request for access has been reviewed and approved by Cal OES you

Sign In

to Cal OES Community Portal

Email Address

unkovichr@caloes.ca.gov

Password

.....

Log In

Forgot Password?

Not a member? Sign Up

Need assistance? Contact Support



GOES
GOVERNOR'S OFFICE
OF EMERGENCY SERVICES

• <https://engage.caloes.ca.gov/s/login/>





Thank you for your commitment to the Mutual Aid System

OES JOB AIDS, FORMS, SAMPLES AND CFAA AGREEMENT

[Google Drive Strike Team](#)
[Job Aids](#)

