INCIDENT ACTION PLAN

RIVER INCIDENT

CA-KRN-2620086

Wednesday

OPERATIONAL PERIOD

5/20/2026 0700

to

5/21/2026 0700

Scan for IAP

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:	2. Operational Period:	Date From:	5/20/2026	Date To:	5/21/2026
RIVER		Time From:	0700	Time To:	0700

3. Objective(s):

Management Objectives

- Provide for emergency personnel and public safety at all times.
- Protect property, improvements, and infrastructure.
- Ensure coordinated, timely and accurate release of public information.
- Maintain fiscal accountability and keep costs commensurate with values at risk.

Control Objectives

- Keep the fire within current containment lines.

General Situational Awareness:

5. Site Safety Plan Required? Yes ☐ No ☑

Approved Site Safety Plan(s) Located at:

6. Incident Action Plan

☑ ICS 203	☐ ICS 215A	☐ ICS 205 A	☑ Perimeter Map
☑ ICS 204	☐ ICS 220	☐ Training Message	☐
☑ ICS 205	☐ Facility Maps	☐ Travel Map	☐
☑ ICS 206	☑ Weather Forecast	☐ Demob Plan	☐ County Health Message
☑ ICS 208	☐ Fire Behavior	☐ Finance Message	☑ ICS 214

7. Prepared By: B.J. Corey Position/Title: PSC Signature: _____

8. Approved by Incident Commander: Jason Schillinger Signature: _____

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: RIVER	**2. Operational Period: Date From:** 5/20/2026	Date To: 5/21/2026	
	Time From: 0700	Time To: 0700	

3. Incident Commander(s) and Command Staff:		**7. Operation Section:**		
IC/UC's	Jimmy Blue / TBD	Operations		
Deputy		Deputy Operations		
Safety Officer		Night Ops		
Information Officer		Staging Area		
Liaison Officer		**Branch**		
4. Agency/Organization Representatives:		Division/Group	A/B/M/R/Y	TBD
Agency/Organization	Name	Division/Group		
CALFIRE	Dave Shy/Dave Martin (t)	Division/Group		
USFS	Josh Acosta	Division/Group		
		Division/Group		
		Branch		
		Division/Group		
		Division/Group		
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		Division/Group		
5. Planning Section:		Division/Group		
Chief	B.J. Corey	Division/Group		
Deputy		Division/Group		
Resource Unit		Division/Group		
Situation Unit		Division/Group		
Documentation Unit		Division/Group		
Demobilization Unit		Division/Group		
GISS		Division/Group		
FBAN		Division/Group		
IMET		Division/Group		
Training Tech Spec		**Air Operations Branch**	**Director:**	
		Air Support Group Supervisor		
		Air Tactical Group Supervisor		
6. Logistics Section		Helibase Manager		
Chief	Mason Crist			
Supply Unit		**8. Finance/Administration Section:**		
Facilities Unit		Chief		
Ground Support Unit		Time Unit		
Communications Unit		Procurement Unit		
Medical Unit		Comp/Claims Unit		
		Cost Unit		

Prepared By: Name:	B.J. Corey	Position/Title:	PSC	Signature: ________________________
ICS 203		Date/Time:	5/19/2026	2300 hours

Weather Forecast	Latitude:		Longitude:			
1. Incident Name:	2. Operational Period:	Date From:	5/20/26	Date To:	5/21/26	
RIVER		Time From:	0700	Time To:	0700	

.DISCUSSION...
A warming and drying trend will continue until Friday. Thus, elevated fire weather throughout the week. There will be low daytime humidity with poor overnight recovery each night for the remainder of this week. Afternoon and evening breezes will occur each day, but winds will otherwise be light.

.WEDNESDAY...

Sky/weather.....Sunny.
Max temperature.....73-77.
Min humidity.....12-16 percent.
Eye level winds.....South 3-5 mph in the morning shifting to the west 5-8 mph in the afternoon.
Surrounding ridge...Southwest 9-17 mph. Gusts to 25 mph in the afternoon.
Mixing height.....Rising to 8500 ft AGL.
Transport winds.....West around 8 mph.
Wind (20 ft).....South 5-8 mph in the morning shifting to the west 8-12 mph with gusts to 18 mph in the afternoon.

.WEDNESDAY NIGHT...

Sky/weather.....Mostly clear.
Min temperature.....55-59.
Max humidity.....22-27 percent.
Eye level winds.....Northwest 4-7 mph in the evening shifting to the northeast 2-4 mph overnight.
Surrounding ridge...Northerly 6-13 mph. Gusts to 20 mph in the evening.
Mixing height.....Lowering to 300 ft AGL.
Transport winds.....North around 7 mph.
Wind (20 ft).....Northwest 6-11 mph with gusts to 16 mph in the evening shifting to the northeast 3-6 mph overnight.

.THURSDAY...

Sky/weather.....Sunny.
Max temperature.....75-80.
Min humidity.....10-15 percent.
Eye level winds.....Southeast 2-4 mph in the morning shifting to the west 4-7 mph in the afternoon.
Surrounding ridge...Southerly 9-17 mph. Gusts to 25 mph in the afternoon.
Mixing height.....Rising to 8000 ft AGL.
Transport winds.....West around 9 mph.
Wind (20 ft).....Southeast 3-6 mph in the morning shifting to the west 8-12 mph with gusts to 18 mph in the afternoon.

PREPARED BY: B.J. Corey	Date/Time: 5/19/26	

ASSIGNMENT LIST (ICS 204 WF)

1. Incident Name:	2. Operational Period:				3. Branch	Division
RIVER	Date From:	05/20/26	Date To:	05/21/26		A/B/M/R/Y
	Time From:	0700	Time To:	0700	Page 1 of 1	

4. Operations Personnel:

Operations Section Chief:		Night Ops:	
Branch Director:		Branch Safety:	
Division/Group Supervisor:	**TBD**	Air Attack:	

5. Resources Assigned:

Resource Identifier	ALS	LWD	Leader	Personnel	Request #	Hours	Reporting Location
Kern Valley IHC							
CRW T2IA Scorpions 2							
ENG SQF 47							
WT SQF 24							

6. Work Assignments:

Mop up were needed and keep fire within existing containment lines.

7. Special Instructions:

8. Communications

Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Mode	Notes
KRN 3	1	DISPATCH	155.6250	(T7) 167.9	158.8500	(T7) 167.9	A	
CDF T31	2	TACTICAL	151.3925	(T17) 67.0	151.3925	(T17) 67.0	A	
Air To Ground	14	A/G	169.4000		169.4000			
CALCORD	15	TACTICAL	156.0750	(T6) 156.7	156.0750	(T6) 156.7	A	
AIR GUARD	16	EMERGENCY	168.6250		168.6250	T-1, 110.9		

9. Prepared by: Name: B.J. Corey PSC

Signature:_____

ICS 204 Date/Time: 5/19/2026 2200 Personnel Count: 0

ICS 205 - INCIDENT RADIO COMMUNICATIONS PLAN									CONTROLLED UNCLASSIFIED INFORMATION//BASIC
1. Incident Name:			2. Date/Time Prepared		3. Operational Period:				
RIVER			Date: 05/19/2026		Date From: 05/20/26		Date To: 05/21/26		
Incident Channels			Time: 1930		Time From: 0700		Time To: 0700		
4. Communications									
Ch#	**Function**	**Name**	**Assigned To**	**Rx Freq**	**Rx Tone**	**Tx Freq**	**Tx Tone**	**Mode**	**Notes**
1	DISPATCH	KRN 3	ALL DIVS	155.6250	(T7) 167.9	158.8500	(T7) 167.9	A	
2	TACTICAL	CDF T31	ALL DIVS	151.3925	(T17) 67.0	151.3925	(T17) 67.0	A	
3	TACTICAL	CDF T32	UNASSIGNED	159.3825	(T17) 67.0	159.3825	(T17) 67.0	A	
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14	A/G	Air To Ground	ALL DIVS	169.4000		169.4000			
15	TACTICAL	CALCORD	ALL DIVS	156.0750	(T6) 156.7	156.0750	(T6) 156.7	A	
16	EMERGENCY	AIR GUARD	ALL DIVS	168.6250		168.6250	T-1, 110.9		
17									
18									
19									
20									
5. Special Instructions									
This is a test									
6. Prepared by (Communications Unit Leader): Name:						Signature:_____			
ICS 205 - CONTROLLED UNCLASSIFIED INFORMATION//BASIC				NIMS IAP		Date/Time: 05/19/2026		1930	

AIR OPERATIONS SUMMARY ICS-220

Time Prepared	Date Prepared	Prepared By
2300	Tuesday, May 19, 2026	

Incident Name / Number	Sunrise	Startup	Cutoff	Sunset	Shutdown	Operational Period - Date	Operational Period - Time
RIVER / CA-KRN-2620086	7:36	8:06	*18:37*	*19:07*	19:37	Wednesday May 20, 2026	0700-2100

General Remarks, Safety Notes, Hazards, Air Operations Special Equipment, etc.

TRACK ALL DIPSITE LOCATIONS / NUMBER OF DIPS / GALLONS TAKEN.
TRACK ALL DROP LOCATIONS / NUMBER OF DROPS / GALLONS DROPPED
All GPS DATA TO BE COLLECTED IN DEGREES, MINUTES, DECIMAL MINUTES FORMAT.

AVOID Aerial Application of Retardant / Foam / Agent within 300' of Waterways, Bodies of Water, etc.
If Retardant / Foam / Agent is Dropped Within These Areas Immediately Notify the AOBD and Provide the Following Information: Lat / Long, Estimated Number of Gallons and a Map Detailing The Area.

Helibase Information

Name
Latitude
Longitude

Name
Latitude
Longitude
(use page 2 if needed)

TFR Information

Request #
Radius: **NM**
Altitude: **MSL**
Centerpoint: **Lat** **Long**
NOTAMS:
Frequency

Rescue Ship Information

	Day Hoist	Night Hoist
Name		
Phone		
Make/Model		
Location		

Request Procedure for These Aircraft:
Incident Communications
See Medical Plan For Additional Info

Frequencies	TX	Tone	RX	Tone	AM / FM
Command	158.8500	(T7) 167.9	155.6250	(T7) 167.9	FM
AIR / GROUND - TACTICAL	169.4000		169.4000		FM
AIR/AIR ROTARY WING	120.9750		120.9750		AM
Helco Briefing					
AIR TACTICS	172.2500		172.2500		FM
Air Attack Briefing					AM
TOLC					AM
DECK					FM
CALCORD - MEDICAL	**156.0750**	**156.7 (6)**	**156.0750**	**156.7 (6)**	**FM**
AIRGUARD - Emergency Only	**168.6250**	**110.9 (1)**	**168.6250**		**FM**

Position	Name	Phone	Trainee	Phone
AOBD				
ASGS				
HEBM				
HLCO				
AAML				
HLCO				
ATGS				

HELICOPTERS (Use page 2 if Needed)

FAA #	Type	Make/Model	Helibase	Avail	Start	Remarks	FAA #	Type	Make/Model	Helibase	Avail	Start	Remarks

FIXED WING (Use Page 2 if Needed)

FAA #	Type	Make/Model	Base	Avail	Start	Remarks	FAA #	Type	Make/Model	Base	Avail	Start	Remarks

MEDICAL PLAN (ICS 206)

1. Incident Name:	2. Operational Period:	Date From:	5/20/26	Date To:	5/21/26
RIVER		Time From:	0700	Time To:	0700

3. Medical Aid Stations:

Name	Location	Contact Number/Freq	Paramedics

4. Transportation (indicate air or ground):

Ambulance Service	Location	Contact Number	Level of Service
Hall Ambulance	Lost Hills	911	
Mercy Air 15	Bakersfield	911	

5. Hospitals:

Hospital Name	Address, Lat & Long Helipad	Contact Number(s)/ Frequency	Travel Time Air	Travel Time Ground	Trauma Center	Burn Center	Helipad
Kern Medical	1700 Mount Vernon, Bakersfield	(661) 326-2000	5	15	Level 2	☐	☑
Bakersfield Memorial	420 34th St, Bakersfield	(661) 327-1792	5	20		☑	☑
						☐	☐
						☐	☐
						☐	☐

6. Special Medical Emergency Procedures

Line Emergency
Crew Supervisor will contact Division Supervisor with patient complaint/condition and location.
- Division Group Supervisor Contacts:
  1. Closest EMS resource
  2. Communications Unit
- Communications Unit Contacts:
  1. Ground or Air ambulance as requested.
  2. Operations
  3. Safety
  4. Medical Unit
- Division Supervisor or designee will serve as point of contact and run medical emergency on assigned channel.
  1. A pre-assigned tactical frequency (i.e. CALCORD) should be used for IWI and only for duration of the emergency.
- Communications Unit will clear the Command channel for emergency traffic as needed for duration of the need.

Camp Emergency
Contact Medical Unit with patient complaint/condition and location. Medical staff will respond to stabilize the patient.
- Medical Unit contacts
  1. Communications
  2. Safety
  3. Logistics
  4. Operations
  5. Crew Supervisor
  6. Comp/Claims

Injury Reporting Procedures

Nature of Injury:_____
Location of Patient:_____
Point of Contact:_____
Transportation Requested by: Air____ Ground_____
Point of Pick-Up:_____
Lat:_____ **Long:**_____
Patient Unit ID:_____
Is an EMT with Patient: Yes_____ No_____
Age:_____ Sex: Male_____ Female_____

All Emergencies - Secure the area and identified witnesses for later investigation. Keep accurate log of events.

☐ Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

7. Prepared by (Medical Unit Leader):
Signature:_____

8. Approved by (Safety Officer):
Signature:_____

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name:	2. Operational Period:	Date From:	5/20/26	Date To:	5/21/26
RIVER		Time From:	0700	Time To:	0700

Working on steep, uneven terrain. Be mindful of rolling materials.

Ensure radios are properly programmed for today's IAP and that crews are trained in communications procedures for the incident.

Maintain situational awareness. Look up, Look down, Look around

Stay hydrated!!! Time to think = time to drink. Document rest and hydration on 214.

Remain mindful of what is going on around you! LCES!

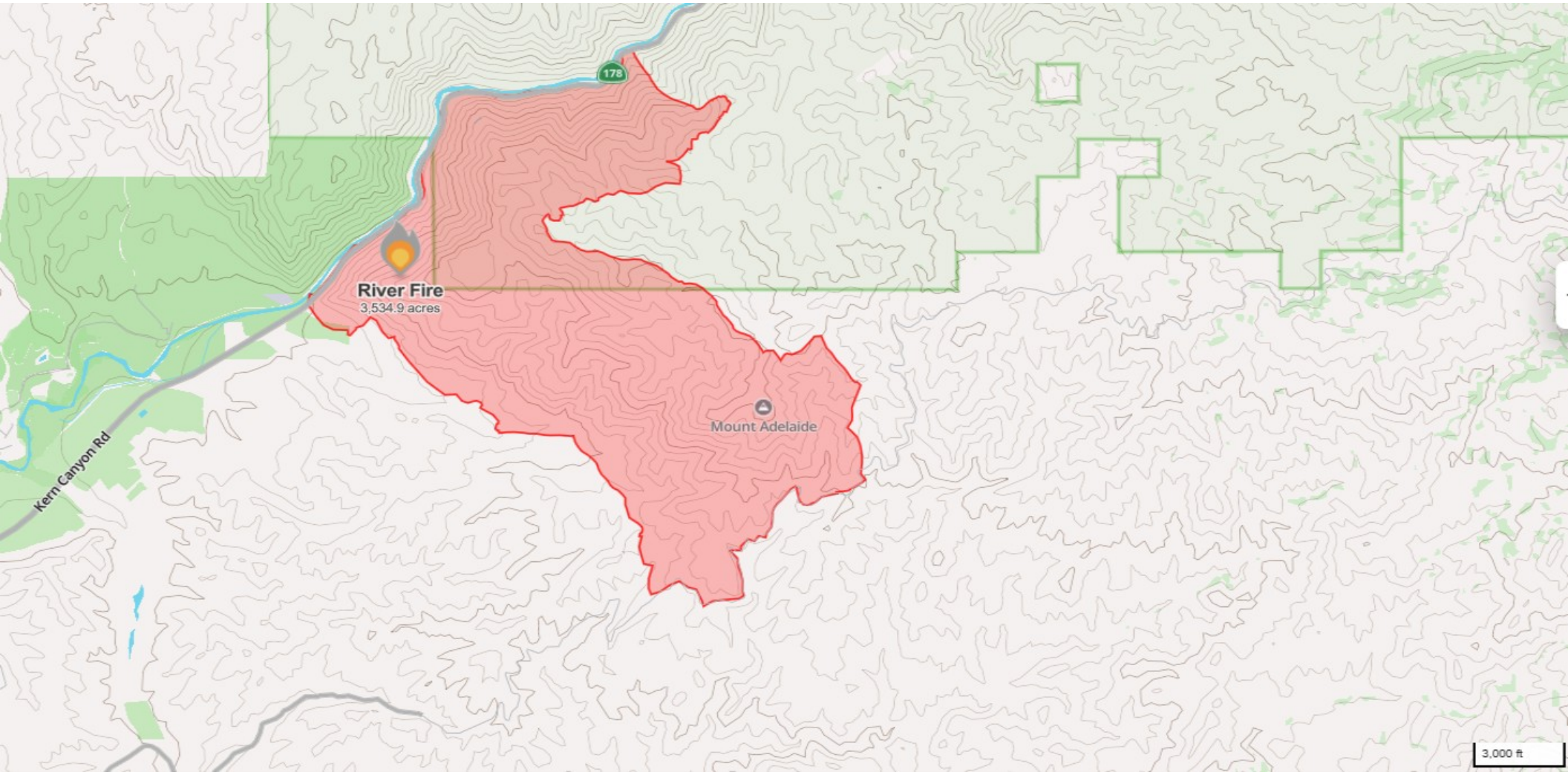
4. Site Safety Plan Required? ☐ No

Approved Site Safety Plan(s) Located At:

5. Prepared By: Position/Title: SOFR

Signature: _____

ICS 208 Date/Time: 5/19/2026 / 2030


178
River Fire
3,534.9 acres
Mount Adelaide
Kern Canyon Rd
3,000 ft

UNIT LOG (ICS 214)

1. Incident Name:	2. Operational Period:	Date From:	5/20/26	Date To:	5/21/26
RIVER		Time From:	0700	Time To:	0700

3. Unit Name/Designators	4. Unit Leader (Name and ICS Position)

5. Personnel Assigned/Designators

NAME	ICS POSITION	HOME BASE

6. Activity Log (Continue on Reverse)

TIME	MAJOR EVENTS

7. Prepared By: Date/Time:

UNIT LOG CONT. (ICS 214)

1. Incident Name:	2. Operational Period:	Date From:	5/20/26	Date To:	5/21/26
RIVER		Time From:	0700	Time To:	0700

6. Activity Log

TIME	MAJOR EVENTS

7. Prepared By: Date/Time: