



ISO

Operational Checklist

Time of Incident: _____ I/C # _____ SSO _____
 Level of Alarm _____ Report to I/C & PASSPORT In _____
 RIT Assigned _____ RITO _____ RITO Briefing _____
 RIT Location _____ RIT 2 _____ RIT 3 _____

Elapsed Time

5

10

15

20

25

30

35

40

45

50

60

Action Plan	OFFENSIVE	MARGINAL	DEFENSIVE
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Significant Incident Events	Rescue(s)	Fire Behavior Event	Water Supply	Collapse
	Master Streams	Primary Search	Ventilation	Forcible Entry
	How Long Operating	Secondary Search		

Primary Functions	Complete 360 size-up	Evaluate & remove imminent hazards	Advise IC of potential hazards	Evaluate assignments & effectiveness
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Construction Information		
Dimensions:		
Stories:		Basement: Y / N
Lightweight / Truss	Wood Frame	Ordinary
Noncombustible	Fire Resistive	Installed Systems
Collapse Potential Evaluation		
Likely	Questionable	Unlikely
<i>EVALUATE THE POSITIONS OF COLLAPSE DANGER ZONE (HEIGHT + 1/2)</i>		
<input type="checkbox"/> Structural degradation <input type="checkbox"/> Excessive loads <input type="checkbox"/> Water applied Set Entry Restriction Markings		
Utilities		
Gas	Electric	Water
Incident Termination Activities		
<i>Debrief with I/C & SSO – Complete ISO Incident Summary Form</i>		
Air Monitoring <small>4 Gas, Particulate, Other Issue all clear from SCBA</small>	RIT Demobilized <small>All companies advised</small>	Cause & Origin Team Safety

Operations Evaluation	
Flashover / Backdraft potential	
Traffic control	
Smoke evaluation (color, velocity)	
% of building involved in fire	
Estimate of required water flow	
Ladders to upper floors for escape	
Exposures protected	
Tactical assignments effective	
Overall PPE use	
Slip/fall hazards	
Communications within span of control	
Accountability system usage	
Environmental conditions	
REHAB & EMS on standby (Location)	
Operational benchmarks completed	

Accidents/Injuries Must Be Investigated Prior to Termination