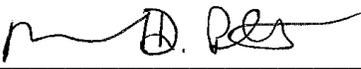


SOUTH CAROLINA FIREFIGHTER MOBILIZATION PLAN  
Section 23-49-10. "Firefighter Mobilization Act of 2000"

REVISION 1

Effective date: 24 August 2006

Approved By:   
Michael Platt - Chairman

Date: 8/24/06

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## 1.0 PURPOSE

This procedure provides the guideline to implement and administer the “Firefighter Mobilization Act of 2000” which was signed into law July 2000. This law created the South Carolina Firefighter Mobilization Oversight Committee. This committee shall establish the South Carolina Firefighter Mobilization Plan that this procedure outlines. The Firefighter Mobilization Plan is a state plan to assist any fire department in the state with resources if an event such as a fire, rescue, terrorism attack, hazardous materials event, or natural disaster occurs that cannot be handled by the local department. It does not take the place of any local mutual aid agreement but only enhances them by providing statewide aid. The plan can be implemented at any time at the request of an incident commander or can be implemented by the State Fire Marshal as part of the South Carolina Emergency Operations Plan and ESF 4 and 9 responses to possible conditions that could impact the state. Activation does not take a declaration of a State of Emergency by the Governor. To receive help the department must have a signed statewide mutual aid agreement on file with SCEMD.

## 2.0 REFERENCES

1. Title 23 Code of laws of South Carolina, 1976 Chapter 49, Firefighter Mobilization Act of 2000 (23-49-10) signed into law in July 2000.
2. Section 23-49-20 South Carolina Firefighter Mobilization Oversight Committee
3. South Carolina Emergency Operations Plan
4. ESF 4 and 9 SOP
5. Fire Fighter Mobilization SOP

## 3.0 DEFINITIONS

1. South Carolina Firefighter Mobilization Committee:  
A committee established by state law 23-49-20 comprised of the following:

1. State Fire Marshal, Chairman
2. Director of the State Emergency Management Division, Vice Chairman
3. State Forester

The Governor appoints the following to three-year offsetting terms during the month of July:

4. A County Emergency Preparedness Director
5. Six fire prevention and control personnel representing the SC Firefighter’s Association and the SC State Association of Fire Chiefs:
6. Executive Director of the South Carolina State Firefighter’s Association shall serve as ex officio, non-voting member.

This committee shall establish the South Carolina Firefighter Mobilization Plan that will have procedures and guidelines for dispatching and deploying rural and municipal fire and rescue resources and establish a system of regions in the state for managing fire and rescue emergencies utilizing an incident command system. The committee shall appoint the number of state and regional coordinators the committee considers necessary and sufficient for execution of the Firefighter Mobilization Plan.

2. State Firefighter Mobilization Coordinator - This person is designated by the committee to be in charge of managing the state response for fire and rescue services. This will be the State Fire Marshal or his designee who also functions as the ESF 4 Co-Coordinator and ESF 9 Coordinator when the South Carolina Emergency Operations Plan is implemented.

3. Regional Firefighter Mobilization Coordinator - This person is designated by the committee to be in charge of a region for the purpose of managing the regional response for fire and rescue services and reports to the State Firefighter Mobilization Coordinator. This position is a volunteer who is furnished equipment such as a lap top computer, cell phone, etc. by the State Fire Marshal's office. If this individual is a member of the fire service they must have approval of their department's management. When the Regional Firefighter Mobilization Coordinator is mobilized they are basically on loan from their department to the State Fire Marshal. The Division of Fire & Life Safety does not compensate them for hours worked but may receive mileage, meals, and motel reimbursement in accordance with LLR policy. They will be a temporary employee of the Department of LLR and serve at the direction of the State Fire Marshal.
4. Firefighter Mobilization Incident Command Support Team (FMICST) – This two person team will be responsible for coordinating with the incident commander for the management of all incoming mobilization assets. The FMICST may also be utilized as an unofficial incident management team member should the incident commander request such actions of the team. The team will be deployed at the Chairman's discretion or through consensus of the Firefighter Mobilization Oversight Committee. At a minimum, two personnel will make up the FMICST, however this number can be changed depending on the complexity and size of the incident. When the FMICST is mobilized they are basically on loan from their department to the State Fire Marshal. The Division of Fire & Life Safety does not compensate them for hours worked but may receive mileage, meals, and motel reimbursement in accordance with LLR policy. They will be a temporary employee of the Department of LLR and serve at the direction of the State Fire Marshal.
5. Firefighter Mobilization Regions - These are the same regions as used by the Fire Academy, which divides the state into seven regions.
6. Qualified Person – This is an individual who is at least 18 years old, meets the credential requirements as outlined in section 7.0 of this procedure, is listed as a member of a Firefighting Mobilization Plan team and has been given a Firefighter Mobilization identification card. They must also be registered as a firefighter with the State Fire Marshal's office.
7. ESF 4 – Emergency Support Function 4 is an annex of the South Carolina Emergency Operations Plan that deals with Firefighting. This ESF has co-coordinators. The State Fire Marshal is responsible for structural firefighting and the SC Forestry Commission is responsible for wildland fires.
8. ESF 9 – Emergency Support Function 9 is an annex of the South Carolina Emergency Operations Plan that deals with Search and Rescue. The State Fire Marshal is responsible for this ESF that involves the state fire and rescue service and coordinates with other State agencies and Federal Resources.
9. Participating Department - An Organization/Department that has the personnel or equipment and is registered under the mobilization plan (Attachments, 8.2, 8.3, 8.4) and will be able to respond in state or out of state to an event such as a fire, rescue, terrorism attack, hazardous material event or natural disaster, when requested if resources are available.
10. Non-Participating Department - An Organization/Department, that does not have the personnel or equipment and is not able to respond outside of their local or local mutual aid area. It is important for a Non-Participating Department to register by completing attachments 8.2 and 8.3 so the Firefighter Mobilization database will have up to date information in case the department needs assistance. At no time will an Organization/Department or fire station be denied

assistance for Non-Participation. The State Firefighter Mobilization Plan is non-discriminatory on who receives the needed resources. Non-Participating Departments may provide a station as a staging area or housing for other emergency organizations.

#### 4.0 SCOPE & RESPONSIBILITY

1. This procedure outlines how fire and rescue organizations in this state should operate under this law that requires a Firefighter Mobilization Plan. It outlines how the Firefighter Mobilization Plan will be implemented to help protect the citizens and fire service personnel during any emergency. This plan does not take the place of any local mutual aid agreements and is designed to assist any fire chief with additional fire service and rescue resources when requested. Pursuant to the Firefighter Mobilization law, all fire and rescue resources requested and received shall be under the command of the local authority having jurisdiction during an emergency until such resources are released.
2. This Firefighter Mobilization Plan shall be used if EMAC is implemented and South Carolina fire and rescue resources are requested to assist another state. No fire service or rescue resources shall respond within the state or to another state without being tasked and deployed per this Firefighter Mobilization Plan except those with local mutual aid agreements and border counties who have mutual aid agreements with North Carolina or Georgia fire departments. The purpose of the Firefighter Mobilization Plan is to ensure a coordinated effort of fire and rescue resources from within the state or out of state and they are provided to a specific request of the appropriate authority within state or another state. When implemented, the Chairman of the SC Firefighter Mobilization Oversight Committee is the coordinating entity.

#### 5.0 PROCEDURE

##### **DISCLAIMER**

The Firefighter Mobilization Committee expressly reserves the right to change any of its guidelines or make exceptions to the guidelines stated here at anytime. This guideline in no way infers or implies a contract of employment. The language used in this document does not create any employment contract.

- 5.1 The South Carolina Firefighter Mobilization Oversight Committee was established by law and is required to establish the South Carolina Firefighter Mobilization Plan. The law designated this committee as being responsible for fire and rescue resource mobilization.
- 5.2 The Firefighter Mobilization Plan is a state plan designed to assist any fire department in the state with resources, manpower, and equipment if an event such as a fire, rescue, terrorism attack, hazardous material event, or natural disaster occurs that cannot be handled by the local fire department. It also is a plan to assist another state if they request fire and rescue resources thru the EMAC plan. The firefighter mobilization plan does not overrule or interfere with any local mutual aid agreements but only enhances them by providing statewide resources including manpower and equipment. It will be referred to as the Firefighter Mobilization Plan in this procedure.
- 5.3 The Firefighter Mobilization Plan can be implemented at any time at the request of an incident commander or the Chairman of the SC Firefighter Mobilization Committee. It can also be implemented as part of the South Carolina Emergency Operations Plan and ESF 4 and 9 responses to possible conditions that could impact the state. Activation does not take a declaration of a State of Emergency by the Governor. To receive help, the department must have a signed statewide mutual aid agreement on file with SCEMD.

- 5.4 Firefighter Mobilization Plan activation for any emergency that has occurred:
1. The incident commander can request help from his County EMD Director or he can call the SCEMD warning point.
  2. The Incident Commander or County EMD Director contacts the SCEMD warning point at (803) 737-8500 or by radio with specific details of the emergency situation, resources requested, staging area location, and a point of contact person and phone number so the State Mobilization Coordinator can make contact with the requester if needed.
  3. The SCEMD duty officer immediately contacts the State Fire Marshal/ESF 4/9 Coordinator, who notifies the State Firefighter Mobilization Coordinator.
  4. The State Firefighter Mobilization Coordinator immediately performs the following:
    - a. Notify all Regional Firefighter Mobilization Coordinators and together utilize or design an Incident Action Plan (IAP). Per the plan, Regional Firefighter Mobilization Coordinators will request help from their county fire service contacts to mobilize the resources or place them in a stand by mode. Mobilized resources are sent a tasking sheet (Attachment 8.8) with a tasking number and are assigned to a specific staging location. The ESF 4 and 9 SOP may be utilized for planning and information. Reference the Firefighter Mobilization Plan Standard Operating Procedure section 5.0 for the specific type emergency event and various task force groups
    - b. Notify Firefighter Mobilization Committee Members
    - c. Advise the Director of LLR.
    - d. Make contact with the SCEMD Response Operations Manager (or Duty Officer after normal working hours) and request any additional state or federal resources needed.
- 5.5 The State Firefighter Mobilization Coordinator when notified by the State Warning or by direct request from a fire chief shall perform the following:
1. Contact the Regional Firefighter Mobilization Coordinator covering the county making the request and together utilize or develop and Incident Action Plan (IAP) and request assistance as needed. The regional coordinator may need to be deployed to the incident.
  2. Notify all regional mobilization coordinators.
- 5.6 If the State Firefighter Mobilization Coordinator, FFM Regional Coordinators, or any member of the FF Mobilization Committee are informed about a major disaster or incident they should advise each other. The Regional Coordinator or a FFM committee member may be sent to the area to advise the local fire chief of the assets and resources available from FFM. This person then becomes a forward command point and initiates the FFM plan if requested to do so by the local incident commander.
- 5.7 Firefighter Mobilization Plan activation for an impending emergency situation such as a hurricane, terrorism threat, or similar event or a request comes from another state through EMAC for fire and rescue resources, will be implemented as follows:

1. The South Carolina Emergency Operations Plan may or may not be implemented, but the ESF 4/9 Coordinator/State Firefighter Mobilization Coordinator will contact all Regional Firefighter Mobilization Coordinators and advise them of the potential emergency situation.

The State and Regional Firefighter Mobilization Coordinators will review the ESF 4 and 9 SOP and Firefighter Mobilization SOP, modify as needed or develop a new Incident Action Plan (IAP) and then alert, mobilize and stage resources per the SOP or IAP. Mobilized resources are sent a tasking sheet (Attachment 8.8) with a tasking number and are assigned to a specific staging location.

2. The ESF 4 and ESF 9 SOP, the Firefighter Mobilization SOP, or a new IAP per the Firefighter Mobilization Plan will be utilized to pre-stage fire service resources and other State and Federal resources such as FEMA US&R teams based on the situation.
  3. Notify the Director of LLR.
  4. Make request per SCEMD procedures for other state resources or federal resources such as FEMA US&R teams.
- 5.8 When the Firefighter Mobilization Plan is activated the State Firefighter Mobilization Coordinator will immediately notify all Regional Firefighter Mobilization Coordinators. They will review the availability of the closest resources within that region that are not already involved. Then the State and Regional Firefighter Mobilization Coordinators will develop an IAP and mobilize and task the closest resources available. For natural disasters such as a hurricane, tornado, or earthquake, most resources within the region impacted will be committed in their own response area so resources from other regions will be needed. The closest Regional Firefighter Mobilization Coordinators will make contact and begin to locate resources, and per the State Firefighter Mobilization Coordinator's directions, mobilize them or place resources on local standby status with the potential to be mobilized as needed. For an impending hurricane, resources from the upstate may be alerted, mobilized, and pre-staged and others placed on standby in accordance with the SCEMD procedures. See the ESF 4 & 9 Standard Operating Procedure.
- 5.9 The Regional Firefighter Mobilization Coordinator for the impacted region will mobilize resources in their region, then deploy if needed to the incident command post to assist with coordinating the resources reporting to the staging area and help with accountability of manpower and equipment.
- 5.10 Each Regional Firefighter Mobilization Coordinator will task and track all resources they mobilize and track those placed on standby. Only those resources that have been assigned a tasking sheet and a number and tasked to respond will be utilized by the requesting organization.
- 5.11 The State Firefighter Mobilization Coordinator may request the FMICST to the incident. Large and long-term events will require rotating FMICST's to assist and support the incident command.
- 5.12 Mobilized personnel should bring adequate work clothing based on the weather, personal hygiene items, medicines, bedroll, food, and water for a three (3) day deployment (See Attachment 8.7 Personal Equipment check sheet).

- 5.13 The FMICST will coordinate with departments that have personnel deployed to arrange for rotating crews. Those teams within 50 miles of home may be rotated every 24 hours. Those teams from more than 50 miles away should plan to rotate after a minimum of two days.

## 6.0 Resource Planning / Registration

- 6.1 Resources will be segregated into the following major groups:

1. Structural firefighting teams
2. Firefighting water supply
3. Wildland firefighting teams
4. Hazardous materials teams which include terrorism response teams
5. Rescue teams
  - a. Vehicle extrication
  - b. US&R
  - c. Confined space and trench rescue
  - d. High level rescue
  - e. Water rescue and swift water

- 6.2 It would be best to have at least one task force for each of the above major groups from each county. For some counties with limited resources it will take a regional task force for some of the above teams.

- 6.3 Registration will be segregated into the following major groups:

1. Participating Departments are those with the capability to send vehicles/personnel to major emergencies in or out of state. The following registration Attachments 8.2, 8.3 and 8.6 must be submitted as follows:
  - a. To obtain a username and password from the Mobilization Database Coordinator the department must have a signed statewide mutual aid agreement on file with EMD.
  - b. Then go to the web site [www.llr.state.sc.us/firemarshal.asp](http://www.llr.state.sc.us/firemarshal.asp) and find the link to the South Carolina Firefighter Mobilization plan. Fill out the Request for Mobilization System Username and Password Form and then fax or mail the completed form to the Firefighter Mobilization Database Coordinator. The State Mobilization Coordinator will confirm the signed statewide mutual aid agreement. Then a username and password will be issued by a secure E-mail only.
  - c. The person with the username and password will have online access to input the department / station data into the Firefighter Mobilization Database.
  - d. Attachment 8.4 of the Firefighter Mobilization Plan is the Personnel Registration form. It shall be completed and submitted to the State Firefighter Mobilization Coordinator who will review the fire chief's signature and enter the information into the mobilization database.
2. Non-Participating Departments should register by completing Attachments 8.2 and 8.3 so the Firefighter Mobilization Database will have up to date information in case your department needs assistance. Non-Participating departments may provide a station as a staging area or housing for other emergency organizations. The State Firefighter Mobilization Program is non-discriminatory on who receives the needed resources to deal with an emergency.

- a. Non-Participating departments may register by obtaining a username and password by following Registration 6.3,1 a, and 6.3,1
- b. Input the department's data online into the Firefighter Mobilization Database, or complete the attachment on hard copy and mail to the mobilization database coordinator at the Fire Marshal's Office who will input the information into the Firefighter Mobilization Database.

## 7.0 Credentials and Qualifications Requirement

7.1 To ensure the safety of the citizens being served and the safety of all emergency services personnel, those persons who want to be a part of the Firefighting Mobilization Plan must be at least 18 years of age and medically qualified per OSHA 1910.156, 1910.134, 1910.120, be respirator qualified to wear an SCBA, be fit tested for their SCBA equipment, must be covered by their department's workers compensation insurance, and also must be adequately trained and qualified for the position indicated. Personnel must be registered as a firefighter with the State Fire Marshal's Office. The minimum training requirements are listed in section 7.2 for each of the five groups and other specific personnel. Fire departments who want their personnel qualified for any of these specific positions so their personnel can respond as part of the Firefighter Mobilization Plan must complete Attachment 8.4 for each of their personnel and circle either yes or no by the appropriate qualification requested with the chief's approval. The Fire Chief must sign the form and by signing this form is certifying his employee is medically qualified and qualified by training or equivalency to the recommended requirements listed in section 7.2 of this plan. Submit the Attachment 8.4 to the State Mobilization Coordinator and once the individual is entered into the database the Chief will be notified. Each person will be contacted about getting their State Firefighter Mobilization Identification Card that will list their qualifications and their personnel ID#. It will be the responsibility of each person to carry his or her own medical information, Attachment 8.5.

7.1.1 Personnel Registration information can be revised or updated by two ways:

1. Resubmit a new Attachment 8.4 showing any changes requested.
2. The chief may send an email from the approved password holder with the department name, individual's name, and SSN# to the FFM Database Coordinator (FFMDBC) explaining what changes are needed to include adding additional qualifications, deleting qualifications or removing the individual from the database. If someone is deleted from the database the chief will return that individual's ID cards to the FFMDBC who will revise the database and the email will be placed in each personnel file as applicable.

7.2 Recommended Minimum required training for the following positions:

1. Firefighter, Interior or Exterior: Firefighter II, 2722, 1136 or 1137 & 1138, First aid or first responder and CPR, 2137.
2. Pump Operator/Driver: Firefighter II, 2722, First aid or first responder and CPR, 1210, 1220, 2137 and a CDL or Class E license. For out of state response, driver must have CDL license
3. Wildland Firefighter: Firefighter II, 2722, 1136 or 1137 & 1138, First aid or first responder and CPR, 8335 or 8330 and 8332, 2137. To participate in, out of state wildland firefighting, firefighters must obtain a National Wildfire Coordinating Group "Red Card" which requires 8330, 8331, 8333, and maintain an annual physical.

4. Hazardous Materials Operations: Firefighter II, 2722, 1136 or 1137 & 1138, First aid or first responder and CPR, 2137, and 2751 is required.
5. Hazardous Materials Technician: Firefighter II, 2722, 2723, 1136 or 1137 & 1138, First aid or first responder and CPR, 2137. After January 1, 2005,
6. Hazardous Materials Technician Specialist: Firefighter II, 2722, 2723, 1136 or 1137 & 1138, First aid or first responder and CPR, 2137, 2736, 2180, 2751, 2752, 2755. After January 1, 2005, Firefighter II replaces Firefighter I.
7. Incident Safety Officer: Firefighter II, 2722, 1136 or 1137 & 1138, First aid or first responder and CPR, 2137, 2150, 2128. After January 1, 2005. If wildland see number 3 above.
8. Technical Rescue Technician: Firefighter II, 2722 First aid or first responder and CPR, 3330, 3310, 3300. After January 1, 2005, and 3390 & 3392 required.
9. Urban Search and Rescue Technician: Must qualify as a Technical Rescue Technician, 3311, 3362, 3314 or 3364, 3366, 3368.
10. Water Rescue Technician: Firefighter II, First aid or first responder and CPR, 2722, 3350. Required, 3351 and 3352.
11. Company Officer: Must hold the position of Company Officer in their department, Firefighter II, 2137, 2128, 1136 or 1137 & 1138, 2722. If wildland see number 3 above.
12. Command Officer: Must hold the position of Chief Officer in their department, Firefighter II, 2137, 2128, 1136 or 1137 & 1138, 2722, 2150. If wildland see number 3 above. Required 2100.
13. Aerial Apparatus Driver/Operator: Firefighter II, 2722, 1136 or 1137 & 1138, First aid or first responder and CPR, 2137, 1210, CDL or Class E license. Required 1250. For out of state response, the driver must have CDL License.
14. Certified Fire Marshal: An individual who has been certified by the State Fire Marshal and has a Certified Fire Marshal pocket card. This person may be mobilized to assist with fire inspections at an emergency situation.

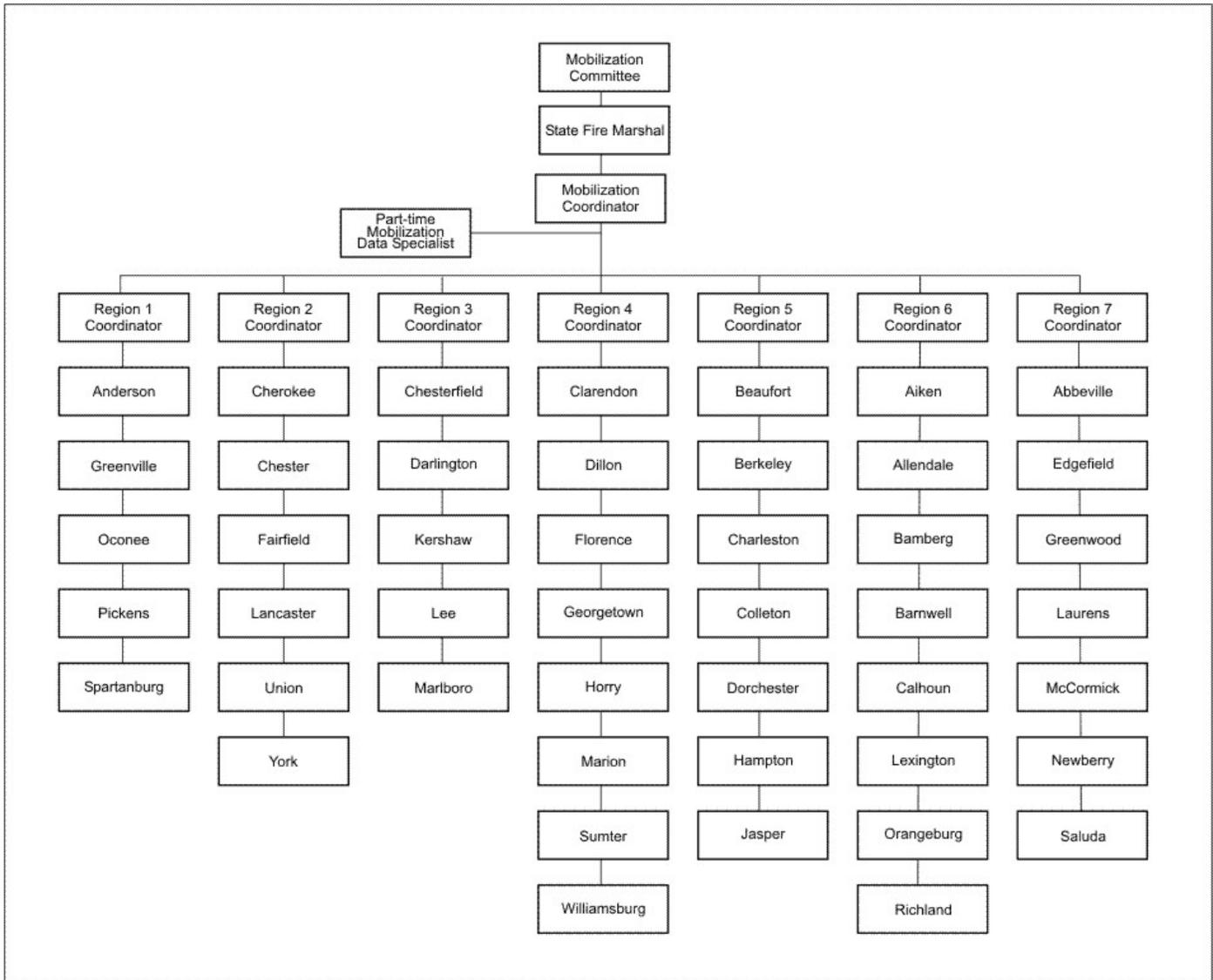
### 7.3 SC Fire Academy Course Index List

<u>Course Code</u>	<u>Course Title</u>
1136	Flammable Liquids/Gas Firefighting
1137	Flammable/Combustible Liquid Firefighting
1138	Pressurized/Compressed Gas Firefighting
1210	Emergency Vehicle Driving Training
1220	Pumper Operations I
1250	Basic Aerial Operations
2100	Fire Officer I
2128	FF Safety And Survival: The Company Officer's Responsibility
2137	Incident Command System
2150	Incident Safety Officer
2180	Chemistry Of Hazardous Materials
2722	Hazardous Material Operations
2723	OSHA – Haz Mat Technician
2736	Emergency Response To Chlorine Incidents
2751	Emergency Response To Terrorism: Basic Concepts
2752	Emergency Response To Terrorism: Incident Management
2755	NBC Terrorism Awareness
3300	Confined Rescue
3310	Rope Rescue Operations
3311	Rescue Systems: Collapse Shoring Operations
3314	Rescue Systems: Moving & Lifting Heavy Objects
3330	Basic Auto Extrication
3350	Water Rescue Operations
3351	Swift Water Rescue Technician I
3352	Swift Water Rescue Technician II
3362	US&R Building Collapse
3364	US&R Lifting & Rigging Heavy Objects
3366	US&R Breaching/Breaking/Cutting & Burning
3368	US&R Technical Search
3390	Confined Space Entry Operations
3392	Confined Space Rescue I
8330	S-190 Introduction To Wildland/Urban Interface Firefighting
8331	S-130 Wildland Firefighting
8332	S-205 Wildland Urban Interface
8333	Wildland Firefighter Annual Physical Fitness Testing
8335	Introduction To Wildland/Urban Interface Firefighting

## 8.0 Attachments

1. Attachment 8.1 Organizational Chart
2. Attachment 8.2 Organization/Department Registration: All organizations/departments, whether participating or non-participating, should complete this form to ensure they are registered in the Firefighter Mobilization Database. At no time will an organization/department be denied assistance for non-participating.
3. Attachment 8.3 Fire Station Registration: All organizations/departments whether participating or non-participating should complete this form so the Fire Station and Chief are listed in the Firefighter Mobilization Database. This will ensure we have up to date information in case your area needs assistance. At no time will a Fire Station with non-participating status be denied assistance. Each station should provide information on parking area, lodging of personnel, building(s), air compressor, fueling capability, and emergency power.
4. Attachment 8.4 Personnel Registration: Individuals must be registered as a firefighter with the State Fire Marshal's Office to be considered for the Firefighter Mobilization Plan. Each person's affiliation with an organization must be included; for example: paid/volunteer or fire/EMS. Name, address, and emergency contact for each Firefighter must also be included. Medical information is for personnel ID card only.
5. Attachment 8.5 Insurance Policy / Medical Information: It is recommended that this be completed at the time of deployment and kept by the company officer responding with the team in case of a medical emergency.
6. Attachment 8.6 Equipment Registration: This form provides vehicle and equipment information and also recommends minimum staffing levels for each vehicle.
7. Attachment 8.7 Personal Equipment Check Sheet: This is a checklist for mobilized personnel to remind them of personal items that they will need for deployment.
8. Attachment 8.8 Resource Tasking: This Tasking Sheet will be provided to each team that is mobilized. Only personnel and equipment (teams) with a Tasking Sheet will be permitted to participate in the mobilization incident. It is very important to keep up with the equipment mileage and personnel time for every incident for possible reimbursement.
9. Attachment 8.9 Resource Request Form: This form can be sent to each Fire Department to aid the Resource Tasking process. This will allow the Fire Chief to have documentation on what resources Mobilization is requesting before they are tasked.

### ORGANIZATIONAL CHART



## SOUTH CAROLINA FIREFIGHTER MOBILIZATION PLAN ORGANIZATION REGISTRATION

Date: \_\_\_\_\_ FDID# \_\_\_\_\_ Region# \_\_\_\_\_

(Circle one) Participating Or Non – Participating Federal Tax ID# \_\_\_\_\_

Organization Name: \_\_\_\_\_

Chief's Name: \_\_\_\_\_

Office # (\_\_\_\_\_) \_\_\_\_\_ Home # (\_\_\_\_\_) \_\_\_\_\_ Cell # (\_\_\_\_\_) \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Zip code: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: \_\_\_\_\_

E Mail# \_\_\_\_\_ 24 Hour Dispatch# \_\_\_\_\_

Number of Stations \_\_\_\_ Dispatch Frequencies Transmit: \_\_\_\_\_ Receive: \_\_\_\_\_  
*(Complete a Station Information sheet for each station.) (Attachment 8.3)*

Check the following resources you have that will be available for firefighter mobilization. Based on qualified personnel per section 7.0 and Attachment 8.4 and approved by the Mobilization Committee.

- |   |  |
|---|--|
| _____ Structural Firefighting Team              | _____ Heavy Rescue Type II                           |
| _____ Aerial Apparatus Team                     | _____ Water Rescue with boat and equipment           |
| _____ Water Supply Team                         | _____ Swift Water Rescue with equipment              |
| _____ Confined Space Rescue Team with equipment | _____ Hazardous Materials Operations with equipment  |
| _____ Auto Extrication with equipment           | _____ Hazardous Materials Technicians with equipment |
| _____ High Level Rescue                         | _____ Aircraft Firefighting team                     |
| _____ Heavy Rescue Type I                       | _____ Wildland Firefighting team                     |
| _____ Certified Fire Marshal                    |  |

Teams are based on Attachments 8.4, 8.6 and Standard Operating Procedure 5.1, 5.3, and 5.4

Provide EMS within its jurisdiction: (Yes / No)

Provide First responder assistance to local EMS: (Yes / No)

Provide workers compensation coverage for department personnel: Yes ( ) No ( )

Number of volunteer suppression personnel / rescue: \_\_\_\_\_

Number of volunteer Non- Suppression / rescue: \_\_\_\_\_

Number of paid suppression personnel: \_\_\_\_\_ Total Personnel: \_\_\_\_\_

**SOUTH CAROLINA FIREFIGHTER MOBILIZATION PLAN**  
**FIRE STATION REGISTRATION**  
(One for each station)

Fire Dept. Name: \_\_\_\_\_ Station# \_\_\_\_\_

Station Chief Name: \_\_\_\_\_

Completed by Name: \_\_\_\_\_ Date: \_\_\_\_\_

\*Circle one: Participating or Non-Participating      FDID \_\_\_\_\_

Station Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Station Phone: \_\_\_\_\_ Station Fax: \_\_\_\_\_

Station E Mail: \_\_\_\_\_ Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Parking area for light weight vehicles # \_\_\_\_\_ Parking area for emergency vehicles # \_\_\_\_\_

Parking area for heavy equipment # \_\_\_\_\_ Helicopter LZ: Yes ( ) No ( )

Number of additional personnel that can be lodged: \_\_\_\_\_ Number of showers: \_\_\_\_\_

Cooking area: Yes ( ) No ( ) Meeting area: Yes ( ) No ( ) Meeting area: Square Foot: \_\_\_\_\_

On site breathing air compressor Yes ( ) No ( ) PSI: \_\_\_\_\_ CFM: \_\_\_\_\_

Vehicle fueling capability on site: Yes ( ) No ( ) If yes: Gasoline ( ) Diesel ( ) LP Gas ( )

Emergency power supply: Yes ( ) No ( )

On site water supply for truck fill: ( ) Hydrant ( ) Static Source: Other: \_\_\_\_\_

Extra foam stored: Type \_\_\_\_\_ Gallons \_\_\_\_\_

Type \_\_\_\_\_ Gallons \_\_\_\_\_

Fire Chief Name: \_\_\_\_\_

Fire Chief Signature: \_\_\_\_\_





**SOUTH CAROLINA FIREFIGHTER MOBILIZATION PLAN**  
**EQUIPMENT REGISTRATION**  
(One per vehicle)

Vehicle Description: \_\_\_\_\_ Year: \_\_\_\_\_ Fuel Type: \_\_\_\_\_  
(Engine, Tanker, Aerial ladder, Platform, Boom, Quint, Trailer, Rescue truck, Brush truck, etc.)

Other Vehicle Description: \_\_\_\_\_

Vehicle Call Number (ID #): \_\_\_\_\_ Four Wheel Drive Yes ( ) No ( )

Number of seat belted positions: \_\_\_\_\_ Number of SCBAs \_\_\_\_\_ Loaded Weight: \_\_\_\_\_

Pump GPM: \_\_\_\_\_ Water Tank Gallons: \_\_\_\_\_ Water Dump Capacity Gallons: \_\_\_\_\_

Drafting Capable: Yes ( ) No ( ) Hard Suction size \_\_\_ Ft. \_\_\_\_\_ Quint Feet: \_\_\_\_\_

Aerial Feet: \_\_\_\_\_ Platform Feet: \_\_\_\_\_ Boom Feet: \_\_\_\_\_

Carried Foam Gallons: \_\_\_\_\_ Foam Equipment: Fixed or Portable Type: \_\_\_\_\_ GPM \_\_\_\_\_

Dump Tank Size: \_\_\_\_\_ Breathing Air Cascade / Compressor PSI: \_\_\_\_\_ CFM: \_\_\_\_\_

Ft. 5" Hose: \_\_\_\_\_ Ft. 3" Hose: \_\_\_\_\_ Ft. 2 ½ Hose: \_\_\_\_\_

Ft. 1 ¾" Hose: \_\_\_\_\_ Other Hose Carried: \_\_\_\_\_

Master Streams Devices: Fixed \_\_\_ Portable \_\_\_ Generator: \_\_\_\_\_ Rating: kw \_\_\_\_\_

Fuel Powered Equipment: Chain Saw, Extraction Cutters / Spreaders, Other: \_\_\_\_\_

Electrical Equipment: Chain Saw, Extraction Cutters / Spreaders, Other: \_\_\_\_\_

Battery Equipment: Chain Saw, Extraction Cutters / Spreaders, Other: \_\_\_\_\_

Types of Radio Communications & Frequency: (VHF, 800) \_\_\_\_\_

Rope Rescue Equipment: Yes ( ) No ( ) If yes, circle one: high level and/or low level

Confined Space Equipment: Yes ( ) No ( ) Trench Rescue Equipment: Yes ( ) No ( )

Water Rescue Equipment: Yes ( ) No ( ) First Responder Unit EMS: Yes ( ) No ( )

Haz-Mat Operations Equipment: Yes ( ) No ( ) Haz-Mat Technician Equipment Yes ( ) No ( )

EMS Ambulance Patient Transport Capable: Yes ( ) No ( )

Vehicle Stocked Medically: ( ) ALS ( ) BLS ( ) First Responder

## SOUTH CAROLINA FIREFIGHTER MOBILIZATION PLAN

### Personal Equipment Check Sheet

If a major event occurs it could cause extensive damage to community resources, and the amount of mobilized resources will cause more of a drain on the local community resources. To ensure essential personnel needs, mobilized personnel should prepare themselves for a multi-day operation without relief. Personnel will need to bring adequate work clothing based on the weather, and a three-day deployment.

\_\_\_\_\_ Food / Water (at least three day supply)

\_\_\_\_\_ Full set of NFPA compliant protective Structural Firefighting gear / SCBA (coat, pants, helmet, gloves, suspenders, boots, protective eyewear, and flash hood).

\_\_\_\_\_ Full set of Wildland fire PPE (including fire shelter)

\_\_\_\_\_ Infectious disease control kit, with basic body substance isolation items (gloves, goggles, pocket mask, etc.)

\_\_\_\_\_ Shirts (at least three)

\_\_\_\_\_ Sweat shirts (at least three, based on weather)

\_\_\_\_\_ Pants (at least three; no shorts while on deployment)

\_\_\_\_\_ Socks (at least three pair)

\_\_\_\_\_ Boots/Consider extra pair

\_\_\_\_\_ Jacket (based on weather)

\_\_\_\_\_ Under clothing (at least three sets)

\_\_\_\_\_ Personal toiletry items (soap, shampoo, deodorant, toilet paper, shaving kit, towels, etc.)

\_\_\_\_\_ Medicines (at least a weeks supply)

\_\_\_\_\_ Bed roll & pillow (cot optional)

\_\_\_\_\_ Eye glasses / Contact lens (extra set)

\_\_\_\_\_ Money

\_\_\_\_\_ Identification materials



## SOUTH CAROLINA FIREFIGHTER MOBILIZATION PLAN RESOURCE TASKING

Date: \_\_\_\_\_ Tasking # \_\_\_\_\_

Event: \_\_\_\_\_

Department Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Report to staging at: \_\_\_\_\_

### NOTE

Upon arrival at the incident report to the staging officer or the Check-In station of Planning Section  
Keep a daily log of Equipment, Mileage, Personnel, and Work Time:

### Resources Tasked

Vehicle Description	Equipment Class Code	Date	Time Arrival	Miles Traveled	Rate of Mileage Pay Per Mile
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____

Personnel responding: (Personnel tasked must be a member of a South Carolina Firefighter Mobilization team and have a Firefighter Mobilization ID card).

Name	ID Number	Date / Time Responding	Date / Time Returning	Total HRS Worked	Rate of Pay Hourly
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____

Comments: \_\_\_\_\_  
\_\_\_\_\_



### SOUTH CAROLINA FIREFIGHTER MOBILIZATION PLAN RESOURCE REQUEST FORM

Date: \_\_\_\_\_ Request# \_\_\_\_\_

Event: \_\_\_\_\_

Department Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Report to staging at: \_\_\_\_\_

Equipment **REQUESTED** \_\_\_\_\_

Vehicle Description	Equipment Class Code	Date	Time Arrival	Miles Traveled	Rate of Mileage Pay Per Mile
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____

Personnel **REQUESTED**: \_\_\_\_\_  
*(Personnel tasked must be a member of a South Carolina Firefighter Mobilization team and have a Firefighter Mobilization ID card).*

Name	ID Number	Date / Time Responding	Date / Time Returning	Total HRS Worked	Rate of Pay Hourly
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_