

## MISSOURI DEPARTMENT OF CONSERVATION PRESCRIBED BURN PLAN

PROJECT DESCRIPTION			
Area/Field, Stand or Unit No.:			
Prepared by:	Date:		
RX Burn Boss approval:	Date:		
Location description (attach map):			
Acreage:			
Site description:			
Sensitive areas:			
Risk Assessment Value (attach Risk Assessment Worksheet ):			

This is a: New Burn Plan\_\_\_\_\_ Re-Approval\_\_\_\_\_

PRESCRIPTION			
Burn objectives:			
Preferred timing:			
Desired fire behavior:			
Conditions needed:		Range	Ideal
	Temperature		
	Relative humidity		
	1 hr. fuel moisture		
	10 hr. fuel moisture		
	Midflame wind speed		
	Wind direction		

Rev. x/2018 (est. 10/2005)

BEHAVE run results:			
Burn area fuel model(s):			Adjacent area fuel model(s):
	Head	Back	Head
Rate of spread (ch/hr or ft/min)			
Heat/unit area (BTU/ft²)			
Fireline intensity (BTU/ft/sec)			
Flame length (ft)			
Smoke management:  Desired atmospheric conditions:  Mixing height (>1650' recommended):  Ventilation rate (>6000 m³/sec recommended):  Air quality restrictions that apply:			
Firelines:			
Adjacent fuels:			

PROJECT RESOURCES			
Prescribed Fire Burn Boss:			
Crew size:			
Ignition/holding crew(s):			
Suppression crew(s):			
Other crew members:			
Hand equipment:	Number	Assignment	
Drip torches			
Backpack pumps			
Swatters			
Broom rakes			
Chainsaws			
Backpack blowers			
Belt weather kit or Kestral			
Other:			

Mechanized equipment:	Number	Assignment
ATVs		
Tractor		
Pickup with water unit		
Dozer		
ATV water unit		
Pulled water unit		
Other:		
Other equipment:	Number	Assignment
Matches (book or box) Cigarette Lighter		
Portable radios		
Blower fuel		
Drip torch fuel		
Bolt cutters		
Pliers		
Drinking water		
Food		
Compass		
Aerial photos, maps, topos		
First aid kits		
Cell phone		
Other:		
Other:		

LOGISTIC	s
Weather monitoring:	
Public notifications:  RFDs:  Law enforcement:  MDC regional office/field offices/fire zone dispato  Adjacent landowners:  Other:	n:

Area / Burn Unit Posting Locations (include map):

Ignition plan (attach map):			
Contingency plans:  Fire out of prescription:  Minor escapes (spotovers):  Moderates escapes:  Major escape:			
BURN PLAN REVIEW	V AND APPROVAL		
Low risk assessment (value 0-14) - Forestry, Wildlife	or Private Land Services Regional Supervisor*		
Approval Signature:	Date:		
Moderate risk assessment (value 14-23) – Forestry as Regional Supervisor may sign in place of the Forestry			
Approval Signature:	Date:		
Approval Signature:	Date:		
High risk assessment (value ≥24) – Fire Management	t Coordination Team		
Approval Signature:	Date:		
Fisheries Regional Supervisor – If there are any streams with permanent flow or permanent ponds, be sure to take note of them and secure the Fisheries RS approval.			
Approval Signature:	Date:		
Natural History Biologist approval if Natural Area involved			
Approval Signature:	Date:		
RE-APPROVAL**			
I certify that this burn plan is still valid and the risk crit changed.	eria (new construction, fuels, etc.) have not		
RXBB Signature:	Date:		
I certify that this burn plan is still valid and the risk criteria (new construction, fuels, etc.) have not changed.			
RXBB Signature:	Date:		
I certify that this burn plan is still valid and the risk crit	eria (new construction, fuels, etc.) have not		

<sup>\*</sup> Regional Supervisors must be Incident Commander (IC) or Prescribed Fire Burn Boss (RXBB) qualified to sign. If a Regional Supervisor lacks this experience, they will select a member of their staff who is qualified as an IC or RXBB to sign on their behalf.

<sup>\*\*</sup> A burn plan may be used for repeat burns of an area without rewrite if the Prescribed Fire Burn Boss certifies that the plan is still valid and none of the risk assessment criteria (such as management objectives, new construction or developments, fuel type, smoke impacts, etc.) have changed.

## **DAY OF BURN CHECKLIST**

Area/Field, Stand or Unit No.:		
Date:		
Burn Day Checklist (Go/No Go): Refer to contents of Burn Plan		
	r, has the Jefferson City, Cer Regional Supervisor will notit on Chiefs will notify their resp	fy their Division Chief of the
All equipment present and in v	vorking order	
Personnel on site with proper	personal protective equi	ipment
Personnel briefed on procedur	res and contingencies	
Personnel briefed on commun	ications and safety zone	es
Backup resources available		
Weather within prescription	Time:	
	Wind speed:	Direction:
	Temperature:	RH:
First aid kits fully stocked		
Emergency medical services:		
Nar	ne	Phone
I certify that all items on the checklist	are "go" for the burn:	
Prescribed Fire Burn Boss		

## **POST-BURN EVALUATION**

Weather	Pre-burn	Time: Temperature: Relative humidity: Windspeed: Direction:		
	Post-burn	Time: Temperature: Relative humidity: Windspeed: Direction:		
Fire behavio	Rate-of-spre	ad: ns:		
Circumstances of any erratic fire behavior:				
Smoke dispe	ersal during bu	ırn:		
Percent of a	rea burned:			
Amount of fu	uel consumed:			
Any public ir	nterest during	burn – pro or con:		