

Delegation of Authority

Division of Forestry

Area Name

As of **TIME, DATE**, I have delegated authority to manage the **FIRE NAME**, to Type **X** Incident Commander, **NAME**. Within the authority, regulations, and policies of the State of Alaska, Department of Natural Resources, Division of Forestry, you are responsible for adhering to objectives, requirements, and courses of action as established in the Wildland Fire Decision Support System (WFDSS) published decision and the objectives in this delegation.

Objectives:

1. Provide for the safety of fire fighters and the public.
2. Describe values at risk that define why action is required. For example: Provide protection to the community of Togiak including the outlying structures along the river.
3. Disseminate information to the media, public, and other agencies in coordination with the Division of Forestry Public Information Officer and following the DOF PIO Guide. Add local PIO point of contact as necessary.
4. Collect structure information in the provided format and deliver this information to the Agency Administrator's Representative, **NAME**, at close-out.
5. The Heavy Equipment Policy for Wildland Fire Suppression for the Department of Natural Resources will be followed. State any specific limitations of heavy equipment use.
6. Define initial attack responsibilities if any.

Constraints:

1. Retardant use will be limited to protection of life and property.
2. The use of dozers is not authorized in the **Birch Creek Wild and Scenic River Corridor**.
3. Fire suppression activity should minimize damage to existing access routes as these are critical for access to the area by locals and residents beyond the immediate area.

The State Logistics Center will serve as expanded dispatch for the duration of the assignment.

The State of Alaska Incident Business Management Handbook will be followed and a review of the final fire finance package as described in the Handbook will be completed prior to the demobilization of the Finance Section.

Adhere to the cost limitations identified in the published WFDSS decision.

The suppression repair will be completed prior to the team's demobilization.

At close-out the team will provide a complete documentation box as defined in the national template, a final fire narrative, and a summary of lessons learned.

The Agency Administrator's Representative will be **NAME, TITLE**. The Incident Commander will meet daily with the Representative to validate strategy and tactics accomplishing the incident objectives. **The State of Alaska Resource Advisor will be NAME, TITLE.**

NAME, XXXXXX Regional Forester

Date

NAME, Incident Commander

Date

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