

Date of Report: 8 - 22 - 94BURNED-AREA REPORT
(Reference FSH 2509.13)PART I - TYPE OF REQUEST

A. Type of Report

- ☒ 1. Funding request for estimated EFFF-FW22 funds
☐ 2. Accomplishment Report
☐ 3. No Treatment Recommendation

B. Type of Action

- ☒ 1. Initial Request (Best estimate of funds needed to complete eligible rehabilitation measures)

☐ 2. Interim Report
 ☐ Updating the initial funding request based on more accurate site data and design analysis
 ☐ Status of accomplishments to date

☐ 3. Final report - following completion of work

PART II - BURNED-AREA DESCRIPTION

- A. Fire Name: St. Joe Complex-1956 N. B. Fire Number: P11707
C. State: Idaho D. County: Shoshone
E. Region: One F. Forest: Idaho Panhandle
G. District: Avery

H. Date Fire Started: 8 - 11 - 94 I. Date Fire Controlled: 8 - 22 - 94
J. Suppression Cost: _____

K. Fire Suppression Damages Repaired with EFFF-PF12 Funds:
 1. Fireline waterbarred (miles) 1.2
 2. Fireline seeded (miles) _____
 3. Other (identify) Waterbar and seed .5 mile of road

L. Watershed Number: 1701030439

M. NFS Acres Burned: 220 Total Acres Burned: 220
Ownership type:
 () State () BLM () PVT () _____

N. Vegetation Types: Thpl/Clun; Abgr/Clun

O. Dominant Soils: Typic Udivitrands

P. Geologic Types: Belt Rocks primarily Quartzite

Q. Miles of Stream Channels by Order or Class:
 4th - .7 5th - 1.0

R. Transportation System:
 Trails: _____ miles Roads: .5 miles

PART III - WATERSHED CONDITION

- A. Fire Intensity (acres): 25 (low) 135 (moderate) 60 (high)
- B. Water-Repellent Soil (acres): 85
- C. Soil Erosion Hazard Rating (acres):
30 (low) 190 (moderate) _____ (high)
- D. Erosion Potential: _____ tons/acre
- E. Sediment Potential: _____ cubic yards / square mile

PART IV - HYDROLOGIC DESIGN FACTORS

- A. Estimated Vegetative Recovery Period: _____ years
- B. Design Chance of Success: _____ percent
- C. Equivalent Design Recurrence Interval: _____ years
- D. Design Storm Duration: _____ hours
- E. Design Storm Magnitude: _____ inches
- F. Design Flow: _____ cubic feet per second per square mile
- G. Estimated Reduction in Infiltration: _____ percent
- H. Adjusted Design Flow: _____ cubic feet per second per square mile

PART V - SUMMARY OF ANALYSIS

- A. Describe Watershed Emergency: The BAER Team determined that no emergency condition exists on this fire. No funding is requested.

- B. Emergency Treatment Objectives:

- C. Probability of Completing Treatment Prior to First Major Damage-Producing Storm:

Land _____ % Channel _____ % Roads _____ % Other _____ %

- D. Probability of Treatment Success

	<----Years after treatment----->		
	1	3	5
Land			
Channel			
Roads			
Other			

E. Cost of No-Action (Including Loss): \$ _____

F. Cost of Selected Alternative (Including Loss): \$ _____

G. Skills Represented on Burned-Area Survey Team:

<input type="checkbox"/> Hydrology	<input checked="" type="checkbox"/> Soils	<input type="checkbox"/> Geology	<input type="checkbox"/> Range
<input checked="" type="checkbox"/> Timber	<input type="checkbox"/> Wildlife	<input type="checkbox"/> Fire Mgmt.	<input type="checkbox"/> Engineering
<input type="checkbox"/> Contracting	<input type="checkbox"/> Ecology	<input type="checkbox"/> Research	<input type="checkbox"/> Archaeology
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

Team Leader: _____

Phone: _____ Electronic Address: _____

H. Treatment Narrative:

Describe the emergency treatments, where and how they will be applied, and what they are intended to do. This information helps to determine qualifying treatments for the appropriate funding authorities. For seeding treatments, include species, application rates and species selection rationale.

PART VI - EMERGENCY REHABILITATION TREATMENTS AND SOURCE OF FUNDS BY LAND OWNERSHIP

Line Items	Units	Unit Cost \$	NFS Lands			Other Lands			All
			Number of Units	EFFS- FW22 \$	Other \$ ident.	Number of Units	Fed \$ ident.	Non-Fed \$ ident.	Total \$
A. LAND TREATMENTS									
B. CHANNEL TREATMENTS									
C. ROADS AND TRAILS									
D. STRUCTURES									
E. BAER EVALUATION/ ADMINISTRATIVE SUPPORT									
F. TOTALS									

PART VII - APPROVALS

1. _____
Forest Supervisor _____ Date _____
2. _____
Regional Forester _____ Date _____