

Date of Report: September 9, 2002

BURNED-AREA REPORT
(Reference FSH 2509.13)**PART I - TYPE OF REQUEST**

A. Type of Report

- ☐ 1. Funding request for estimated WFSU-SULT 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 or design analysis
 - ☐ Status of accomplishments to date
- ☐ 3. Final Report (Following completion of work)

PART II - BURNED-AREA DESCRIPTIONA. Fire Name: Seed Orchard

B. Fire Number: _____

C. State: IdahoD. County: Nez PerceE. Region: OneF. Forest: ClearwaterG. District: North ForkH. Date Fire Started: August 28, 2002I. Date Fire Contained: August 28, 2002

J. Suppression Cost: _____

K. Fire Suppression Damages Repaired with Suppression Funds

- 1. Fireline waterbarred (miles): None
- 2. Fireline seeded (miles): None
- 3. Other (identify): None

L. Watershed Number: 17060306M. Total Acres Burned: 118NFS Acres(**57**) Other Federal (**0**) State (**0**) Private (**61**)N. Vegetation Types: Grass and ponderosa pineO. Dominant Soils: Very shallow to moderately deep, gravelly to cobble, silt loams.

P. Geologic Types: Residual and colluvial Columbia basalts with alluvial river deposits near the base of the slope.

Q. Miles of Stream Channels by Order or Class: One mile of the Clearwater River.

R. Transportation System

Trails: 0 miles Roads: 1 mile

PART III - WATERSHED CONDITION

A. Burn Severity (acres): 78 (low) 40 (moderate) 0 (high)

B. Water-Repellent Soil (acres): 0

C. Soil Erosion Hazard Rating (acres):
118 (low) ____ (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 / second/ square mile): ____

G. Estimated Reduction in Infiltration, (percent): ____

H. Adjusted Design Flow, (cfs per square mile): ____

PART V - SUMMARY OF ANALYSIS

A. Describe Watershed Emergency: None

B. Emergency Treatment Objectives: None

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 checked="" type="checkbox"/> Hydrology	<input checked="" type="checkbox"/> Soils	<input type="checkbox"/> Geology	<input type="checkbox"/> Range	<input type="checkbox"/>
<input checked="" type="checkbox"/> Forestry	<input type="checkbox"/> Wildlife	<input type="checkbox"/> Fire Mgmt.	<input type="checkbox"/> Engineering	<input type="checkbox"/>
<input type="checkbox"/> Contracting	<input checked="" type="checkbox"/> Ecology	<input type="checkbox"/> Botany	<input type="checkbox"/> Archaeology	<input type="checkbox"/>
<input type="checkbox"/> Fisheries	<input type="checkbox"/> Research	<input type="checkbox"/> Landscape Arch	<input type="checkbox"/> GIS	

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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.)

Land Treatments: None

Channel Treatments: None

Roads and Trail Treatments: None

Structures: None

I. **Monitoring Narrative:**

(Describe the monitoring needs, what treatments will be monitored, how they will be monitored, and when monitoring will occur. A detailed monitoring plan must be submitted as a separate document to the Regional BAER coordinator.)

Part VI – Emergency Rehabilitation Treatments and Source of Funds by Land Ownership

Line Items	Units	Unit Cost	# of Units	WFSU SULT \$	Other \$	# of units	Fed \$	# of Units	Non Fed \$	Total \$
A. Land Treatments										
				\$0	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
<i>Insert new items above this line!</i>				\$0	\$0		\$0		\$0	\$0
<i>Subtotal Land Treatments</i>				\$0	\$0		\$0		\$0	\$0
B. Channel Treatments										
				\$0	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
<i>Insert new items above this line!</i>				\$0	\$0		\$0		\$0	\$0
<i>Subtotal Channel Treat.</i>				\$0	\$0		\$0		\$0	\$0
C. Road and Trails										
				\$0	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
<i>Insert new items above this line!</i>				\$0	\$0		\$0		\$0	\$0
<i>Subtotal Road & Trails</i>				\$0	\$0		\$0		\$0	\$0
D. Structures										
				\$0	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
<i>Insert new items above this line!</i>				\$0	\$0		\$0		\$0	\$0
<i>Subtotal Structures</i>				\$0	\$0		\$0		\$0	\$0
E. BAER Evaluation										
Wages				\$750	\$0		\$0		\$0	\$750
				\$0	\$0		\$0		\$0	\$0
<i>Insert new items above this line!</i>				\$0	\$0		\$0		\$0	\$0
<i>Subtotal Evaluation</i>				\$750	\$0		\$0		\$0	\$750
F. Monitoring										
				\$0	\$0		\$0		\$0	\$0
<i>Insert new items above this line!</i>				\$0	\$0		\$0		\$0	\$0
<i>Subtotal Monitoring</i>				\$0	\$0		\$0		\$0	\$0
G. Totals				\$750	\$0		\$0		\$0	\$750

PART VII - APPROVALS

1. /s/ Larry J. Dawson
Forest Supervisor (signature)

09/10/02
Date

2. _____
Regional Forester (signature)

Date