

Date of Report:**BURNED-AREA REPORT****PART I - TYPE OF REQUEST****A. Type of Report**

- ☐ 1. Funding request for estimated emergency stabilization funds
☒ 2. No Treatment Recommendation

B. Type of Action

- ☐ 1. Initial Request (Best estimate of funds needed to complete eligible stabilization measures)
☐ 2. Interim Request # _____
☐ Updating the initial funding request based on more accurate site data or design analysis

Other: Further BAER assessment of the Volunteer Fire was determined by the Forest Supervisor to be not warranted because of low burn severities throughout the fire perimeter, minimal steep slopes, and no critical values at risk.

PART II - BURNED-AREA DESCRIPTION**A. Fire Name:** Volunteer Fire**B. Fire Number:** AZ-COF-000281**C. State:** Arizona**D. County:** Coconino**E. Region:** 03**F. Forest:** Coconino**G. District:** Flagstaff**H. Fire Incident Job Code:** 0304 P3P8TD23**I. Date Fire Started:** May 23, 2023**J. Date Fire Contained:** 90% contained as of 11 June 2023**K. Suppression Cost:** N/A**L. Fire Suppression Damages Repaired with Suppression Funds (estimates):**

1. Fireline repaired (miles):
2. Other (identify):

M. Watershed Numbers:*Table 1: Acres Burned by Watershed*

HUC #	Watershed Name	Total Acres	Acres Burned	% of Watershed Burned
150602020308	Volunteer Canyon	24522	2675	11%

N. Total Acres Burned:

Table 2: Total Acres Burned by Ownership

OWNERSHIP	ACRES
NFS	2582
OTHER FEDERAL (LIST AGENCY AND ACRES)	77 (US Army)
STATE	
PRIVATE	16
TOTAL	2675

O. Vegetation Types:

- a. Colorado Plateau – Ponderosa Pine Forests, Wet and Dry Mixed Conifer Forests, and Montane/Subalpine Grasslands.

P. Dominant Soils:**Q. Geologic Types:** Sandstone, Limestone, Basalt**R. Miles of Stream Channels by Order or Class:**

Table 3: Miles of Stream Channels by Order or Class

STREAM TYPE	MILES OF STREAM
PERENNIAL	
INTERMITTENT	
EPHEMERAL	2.5
OTHER (DEFINE)	

S. Transportation System:

Trails: National Forest (miles):

Other (miles):

Roads: National Forest (miles): 5

Other (miles):

PART III - WATERSHED CONDITION**A. Burn Severity (acres):**

Table 4: Burn Severity Acres by Ownership

Soil Burn Severity	NFS	Other Federal (List Agency)	State	Private	Total	% within the Fire Perimeter
Unburned						
Low						
Moderate						
High						
Total						

B. Water-Repellent Soil (acres):**C. Soil Erosion Hazard Rating:****D. Erosion Potential:****E. Sediment Potential:****F. Estimated Vegetative Recovery Period (years):****G. Estimated Hydrologic Response (brief description):**

PART V - SUMMARY OF ANALYSIS

Introduction/Background

A. Describe Critical Values/Resources and Threats (narrative):

Table 5: Critical Value Matrix

Probability of Damage or Loss	Magnitude of Consequences		
	Major	Moderate	Minor
	RISK		
Very Likely	Very High	Very High	Low
Likely	Very High	High	Low
Possible	High	Intermediate	Low
Unlikely	Intermediate	Low	Very Low

1. Human Life and Safety (HLS):
2. Property (P):
3. Natural Resources (NR):
4. Cultural and Heritage Resources:

B. Emergency Treatment Objectives:

C. Probability of Completing Treatment Prior to Damaging Storm or Event:

Land:

Channel:

Roads/Trails:

Protection/Safety:

D. Probability of Treatment Success

Table 6: Probability of Treatment Success

	<i>1 year after treatment</i>	<i>3 years after treatment</i>	<i>5 years after treatment</i>
<i>Land</i>			
<i>Channel</i>			
<i>Roads/Trails</i>			
<i>Protection/Safety</i>			

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"/> Soils | <input type="checkbox"/> Hydrology | <input type="checkbox"/> Engineering | <input type="checkbox"/> GIS | <input type="checkbox"/> Archaeology |
| <input type="checkbox"/> Weeds | <input type="checkbox"/> Recreation | <input type="checkbox"/> Fisheries | <input type="checkbox"/> Wildlife | |
| <input type="checkbox"/> Other: | | | | |

Team Leader:

Email:

Phone(s)

Forest BAER Coordinator:

Email:

Phone(s):

Team Members: Table 7: BAER Team Members by Skill

Skill Team Member Name

	Skill	Team Member Name
	<i>Team Lead(s)</i>	
<i>Soils</i>		
<i>Hydrology</i>		
<i>Engineering</i>		
<i>GIS</i>		
	<i>Archaeology</i>	
	<i>Weeds</i>	
<i>Recreation</i>		
	<i>Other</i>	

H. Treatment Narrative:

No treatments recommended.

Land Treatments:

Channel Treatments:

Roads and Trail Treatments:

Protection/Safety Treatments:

I. Monitoring Narrative:

No monitoring recommended.

PART VI – EMERGENCY STABILIZATION TREATMENTS AND SOURCE OF FUNDS

Line Items	Units	Unit Cost	# of Units	BAER \$	Other \$	# of units	Fed \$	# of Units	Non Fed \$	Total \$
A. Land Treatments										
				\$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
<i>Insert new items above this line!</i>				\$0	\$0		\$0		\$0	\$0
<i>Subtotal Channel Treatments</i>				\$0	\$0		\$0		\$0	\$0
C. Road and Trails										
				\$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 and Trails</i>				\$0	\$0		\$0		\$0	\$0
D. Protection/Safety										
				\$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 Protection/Safety</i>				\$0	\$0		\$0		\$0	\$0
E. BAER Evaluation										
Initial Assessment	Report			---	\$0		\$0		\$0	\$0
				\$0	\$0		\$0		\$0	\$0
<i>Insert new items above this line!</i>				---	\$0		\$0		\$0	\$0
<i>Subtotal Evaluation</i>				\$0	\$0		\$0		\$0	\$0
F. Monitoring										
				\$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 Monitoring</i>				\$0	\$0		\$0		\$0	\$0
G. Totals				\$0	\$0		\$0		\$0	\$0
Previously approved										
Total for this request				\$0						

PART VII - APPROVALS

1. _____
 Forest Supervisor Date