



SAFENET FIELD CARD

Wildland Fire Safety & Health Reporting Network
Report unsafe situations in all wildland fire operations.



The purpose of the SAFENET FIELD CARD is to provide real time reporting for unsafe situations or close calls for long-term data analysis that will result in identifying trends. Individual(s) submitting SAFENETs should do so based on firsthand observation or participation in the identified event(s).

General	Name/Crew (Optional): _____	Date Reported: _____
	Agency/Organization: _____	Phone (Optional): _____
		Email (Optional): _____

Event	Position Title: _____	Event Date: _____
	Task: _____	Incident Name: _____
	Management Level: (circle) Type 5; Type 4; Type 3; Type 2; Type 1	State: _____
	Resources Involved: _____	Jurisdiction: _____
	_____	Incident Number: _____
		Local Unit: _____

Check Applicable Boxes

Contributing Factors	<input type="checkbox"/> Fire Behavior	<input type="checkbox"/> Equipment
	<input type="checkbox"/> Environmental	<input type="checkbox"/> Human Factors
	<input type="checkbox"/> Communications	<input type="checkbox"/> Other

Human Factors	<input type="checkbox"/> Decision Making	<input type="checkbox"/> Performance
	<input type="checkbox"/> Fatigue	<input type="checkbox"/> Risk Management
	<input type="checkbox"/> Situational Awareness	<input type="checkbox"/> Leadership

Continue on back of form

Incident Type	<input type="checkbox"/> Wildland	Check Applicable Boxes	Incident Activity	<input type="checkbox"/> Initial Attack	
	<input type="checkbox"/> Prescribed			<input type="checkbox"/> Line	<input type="checkbox"/> Extended Attack
	<input type="checkbox"/> All Hazard			<input type="checkbox"/> Support	<input type="checkbox"/> Transfer of Command
	<input type="checkbox"/> Training			<input type="checkbox"/> Transport to/from	<input type="checkbox"/> Mop up
	<input type="checkbox"/> Fuel Treatment			<input type="checkbox"/> Readiness/Preparedness	<input type="checkbox"/> Demob
	<input type="checkbox"/> Work Capacity Test				<input type="checkbox"/> Non-Incident
					<input type="checkbox"/> Other

Narratives	Description: Describe in detail what happened including the concern or potential issue, the environment (weather, terrain, fire behavior, etc. and the resulting safety/health issue).

	Reporting Individual: Please describe actions you took to correct or mitigate the unsafe/unhealthful event:

	Corrective Action: Indicate corrective action(s) taken by leadership:



SAFENET

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