



PRESCRIBED BURN

338

Conservation Practice Job Sheet

PRESCRIBED BURN PLAN

Unit Information:

Landowner Name & Phone Number _____

Acres _____

Location (Section/Township/Range) _____

County _____

Official Notifications Prior to Burn:

AFC Burn Notification Dispatch (800-830-8015) _____

Sheriff's Office _____

Fire Department _____

Neighbor Notification (within 1/4 mile):

Name & Phone _____

Conservation practice standards are reviewed periodically and updated if needed. To obtain the current version of this standard, contact your Natural Resources Conservation Service [State Office](#) or visit the [electronic Field Office Technical Guide](#).

Prescribed Burn Objective:

- _____ Native Grass Management
- _____ Forestland Natural Regeneration
- _____ Forestland Artificial Regeneration
- _____ Undesirable Species Control
- _____ Wildfire Hazard Reduction
- _____ Wildlife Habitat Enhancement
- _____ Other _____

Burn Management: (Describe how each item will be addressed)

Firebreak Preparation

Firing Technique

Fire Sensitive Areas (young pine plantations, buildings, etc.)

Smoke Sensitive Areas (roads, drainages, residences, nursing homes, schools, etc.)

Emergency Contingencies (safety zones, escape routes, escape response procedures)

Site Description:

Maps Attached:

_____ Aerial photograph

_____ Location map

_____ Smoke Screening map

_____ Other _____

Fuel and Weather Prescription:

Required Parameter	Maximum	Minimum	Preferred
Wind Direction			
Air Temperature (F)			
Relative Humidity (%)			
Days Since Rain			
20 ft wind speed (mph)			
Effective wind speed (mph)			
1-Hour fuel moisture (%)			
10-Hour fuel moisture (%)			
100-Hour fuel moisture (%)			
Atmospheric mixing height (ft)			
Other			

List any combination of parameters that will trigger a decision not to burn (e.g., high windspeeds with low 1-hour fuel moisture)

Predicted Fire Behavior:

	Fuel Model ____	Fuel Model ____	Fuel Model ____
Max. Headfire Flame Length			
Min. Headfire Flame Length			
Max. Headfire Rate of Spread			
Min. Headfire Rate of Spread			
Max. Backfire Flame Length			
Min. Backfire Flame Length			
Max. Backfire Rate of Spread			
Min. Backfire Rate of Spread			
Max. Scorch Height			

Fire Crew/Duties:

Burn Boss: _____

Crew: _____

Equipment Needs:

BURN DAY CHECKLIST

Date of Burn: _____

Parameters	Recommended Do Not Burn Conditions	Recommended Range	Forecasted Weather Conditions
Date of Burn			
Air Temp (F)			
Relative Humidity	< or = 25%		
Probability of Ignition	< or = 80%		
Wind Speed			
Wind Direction			
Smoke Category Day	1 or 5		

Check and burn only if all items are addressed:

- _____ Burning assignments understood by all crew members
- _____ Map for all crew members
- _____ Extra precautions for fire sensitive areas
- _____ Smoke sensitive areas not threatened
- _____ Official notifications made
- _____ Neighbor notifications made
- _____ Personal protection equipment in use
- _____ Equipment needed is on site and available
- _____ Transport truck(s) and other equipment in a safe area
- _____ Firebreak width and design adequate
- _____ Forecasted temperature within recommended range
- _____ Forecasted relative humidity > 25%
- _____ Forecasted probability of ignition > 80%
- _____ Forecasted mid-flame wind speed within recommended range
- _____ Forecasted wind direction as recommended
- _____ Forecasted smoke category day 2, 3, or 4

Hourly Belt Weather Recording During the Burn

Time							
Temp							
RH							
Wind Speed							
Wind Direction							