Kentucky Fire Commission
Live Fire Checklist

Candidate Name: _____
Candidate #: _____

Address of Burn:	
Date:	
Time:	
Lead Instructor Name:	
Instructor Number:	

Permits, Documents, Notifications, Insurance

Secure the following written documentation from the owner:

- Permission to burn structure
- Proof of clear title
- Certificate of insurance cancellation
- Acknowledgement of post-burn property condition
- Acknowledgement of the property owner's responsibility of debris removal

Obtain the following:

- Local Burn Permit
- Permission to utilize fire hydrants
- Authority to block off streets or roads
- Assistance with traffic control
- Liability insurance covering damage to other property
- Written evidence of prerequisite training obtained from participating students form outside agencies

Pre-Burn Procedures

All participants briefed on the follow:

- Training structure layout and safety rules
- Crew and instructor assignments
- Building evacuation procedure
- Evacuation signal (must be demonstrated)

All hose lines must be:

- Checked for sufficient size for the area of fire involvement
- Charged and test flowed
- Supervised by qualified instructors
- Manned by adequate number of personnel

All necessary tools and equipment placed into position.

Participants must be checked for:

- Approved full Personal Protective Equipment (PPE)
- Approved Self-Contained Breathing Apparatus (SCBA)
- Adequate SCBA air volume

Ensure all participants have protective ensemble and equipment properly donned

All participants including instructors placed through incident rehabilitation for a baseline set of vital signs

List of Instructors and assignments

List of Participants

Ensure Property Owner has signed Acquired Building Release form

Post-Burn Procedures

- Account for all personnel
- Overhaul remaining fires (As Needed)
- If further training is to be conducted, building must be inspected for stability and hazards
- Conduct training critique
- Prepare records and reports
- Conduct account of activities
- Document any unusual conditions or events
- Document any injuries incurred and treatments rendered

- Document any changes or deterioration of burned building
- Prepare student training records
- Prepare certificates of completion
- Release property to Owner

Responsibilities of Personnel

Instructor-In-Charge

- Plan and coordinate all training activities
- Monitor activities to ensure safe practices
- Inspect building integrity prior to each fire
- Assign instructors to:
  - -Attack hose lines
  - -Backup hose lines
  - -Functional assignments
  - -Teaching assignments
- Brief instructors on responsibilities of:
  - -Accounting for assigned students/Assessing student performance
  - -Clothing and equipment inspection
  - -Monitoring safety
  - -Achieving tactical and training objectives
- Assign coordinating personnel as needed:
  - -EMS
  - -Communications
  - -Water Supply
  - -Apparatus Staging
  - -Breathing apparatus
  - -Incident rehabilitation
  - -Public relations
- Ensure adherence to this standard by all persons within the training area
- No alcohol consumption at any training
- No persons under the influence of drugs or alcohol allowed to participate

Safety Officer

- Prevent unsafe acts
- Eliminate unsafe conditions
- Intervene and terminate unsafe
- Supervise additional safety personnel as needed
- Coordinate lighting of fires with instructor-in-charge
- Ensure compliance of participants personal protective equipment with applicable standards
  - -Protective ensemble
  - -SCBA
  - -Personal alarm devices

Kentucky Fire Commission
Air Quality Application

Name of Fire Department:	
Address of Training Burn:	
County:	
Name of Official Requesting Training:	
Telephone Number:	
Training/Burn Date(s):	
Training/Burn Time(s):	

Pre-Burn Survey

Structure Burn

Identify Composition of:
-Siding Material _____
-Roofing Material _____

Has roofing and siding been adequately removed? Yes _____ No _____

Has carpet, furniture been removed from the structure? Yes _____ No _____

Asbestos

Identify accredited asbestos inspector who completed survey: _____

Date of Survey: _____

If analytical results were positive, has material been removed? Yes _____ No _____

If no, explain why? _____

If yes, identify location of disposal: _____

Property Owner of Burn Site:

Submit the following to the appropriate Air Quality Contact:

- Completed, signed KY Fire Training Commission: *Application for Live Fire Training*
- Copy of an 8.5" x 11" Topographical Map that shows location of proposed fire training. (A clearly drawn sketch of the location may be substituted for the map.)
- Asbestos survey report
- Analytical report of samples analyzed for asbestos

_____ _____

Signature of Person Requesting approval of Fire Training Date

- Ensure that all participants are accounted for, both before and after each evolution
- No alcohol consumption at any training
- No persons under the influence of drugs or alcohol allowed to participate

Instructor

- Monitor and supervised assigned students (No more than 5 per instructor)
- Inspect student's protective ensemble and equipment
- Account for assigned students, both before and after evolutions
- No alcohol consumption at any training
- No persons under the influence of drugs or alcohol allowed to participate

Student

- Acquire prerequisite training
- Become familiar with building layout
- Wear full protective ensemble
- Wear approved self-contained breathing apparatus
- Obey all instructions and safety rules
- Provide documentation of prerequisite training, when from an outside agency
- No alcohol consumption at any training
- No persons under the influence of drugs or alcohol allowed to participate

KENTUCKY

FIRE COMMISSION

STATE FIRE RESCUE TRAINING

Kentucky Fire Commission
Building Floor Plan & Evolution Setup

Address: _____

Date: _____

Time: _____

Lead Instructor: _____

Instructor Number: _____

KENTUCKY
FIRE COMMISSION
STATE FIRE RESCUE TRAINING

Kentucky Fire Commission
Student Group Assignments

Address: _____

Date: _____

Time: _____

Lead Instructor: _____

Instructor Number: _____

Group 1
1. Team Leader:
2.
3.
4.
5.

Group 2
1. Team Leader:
2.
3.
4.
5.

Group 3
1. Team Leader:
2.
3.
4.
5.

Group 4
1. Team Leader:
2.
3.
4.
5.

Group 5
1. Team Leader:
2.
3.
4.
5.

Group 6
1. Team Leader:
2.
3.
4.
5.

Group 7
1. Team Leader:
2.
3.
4.
5.

Group 8
1. Team Leader:
2.
3.
4.
5.

Group 9
1. Team Leader:
2.
3.
4.
5.

Group 10
1. Team Leader:
2.
3.
4.
5.

KENTUCKY
FIRE COMMISSION
STATE FIRE RESCUE TRAINING

Kentucky Fire Commission
Evolution Objectives

Address: _____

Date: _____

Time: _____

Lead Instructor: _____

Instructor Number: _____

Objective 1:

_____
_____
_____
_____

Objective 2:

_____
_____
_____
_____

Objective 3:

_____
_____
_____
_____

Objective 4:

_____
_____
_____
_____

Objective 5:

_____
_____
_____
_____

Objective 6:

Objective 7:

Objective 8:

Objective 9:

Objective 10:

KENTUCKY
FIRE COMMISSION
STATE FIRE RESCUE TRAINING

Kentucky Fire Commission
Accountability

Address: _____

Date: _____

Time: _____

Lead Instructor: _____

Instructor Number: _____

Incident Commander: _____

Instructor In-Charge: _____

Safety Officer(s): _____

Accountability Officer: _____

Engineer on Primary Engine: _____

Engineer on Secondary Engine: _____

Interior Instructors: _____

_____

_____

_____

RIT Team: _____

_____

Incident Rehabilitation Officer: _____

Secondary Instructors: _____

_____

_____

_____

KENTUCKY

FIRE COMMISSION

STATE FIRE RESCUE TRAINING

Kentucky Fire Commission
Site Plan/Vehicle Staging

Address: _____

Date: _____

Time: _____

Lead Instructor: _____

Instructor Number: _____