

**SKIDGINE INCIDENT COMPLIANCE CHECKLIST** Date: \_\_\_\_\_ Time: \_\_\_\_\_

INCIDENT NAME: \_\_\_\_\_ INCIDENT NUMBER: \_\_\_\_\_ RESOURCE #: E- \_\_\_\_\_

COMPANY/CONTRACTOR: \_\_\_\_\_

AGREEMENT NUMBER: \_\_\_\_\_

EQUIPMENT MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

VIN/SERIAL #: \_\_\_\_\_ VEHICLE I.D. #: \_\_\_\_\_

OPERATOR NAME: \_\_\_\_\_

**EQUIPMENT and OPERATOR REQUIREMENTS - SKIDGINE**Type 1:  Type 2:  Type 3:  Type 4:   
(See table below for minimum requirements)**Minimum Requirements***Not all inclusive; for additional clarification refer to agreement (SF-1449 section D)*

			Yes	No
1	<b>Equipment VIN/Serial # matches resource order</b> (Schedule of items)	D.6.3.1		
2	<b>Check-In Process:</b> Completed	D.6.5.3		
3	<b>OF-296 Vehicle/Heavy Equipment Pre-use Inspection Checklist completed</b>	D.17		
4	<b>Agreement:</b> One complete copy	D.8		
5	<b>RT-130 Fire Line Refresher including Fire Shelter (current):</b> <b>Completed Date:</b>	D.3.1		
6	<b>Vehicle Identification:</b> All equipment shall have the company's name and unique identification number affixed to the transport vehicle (not the piece of equipment). The company name and unique ID shall be on each Side of the cab.	D.2.2.3		
7	<b>Machines manufactured after Aug. 1, 1996</b> ROPS meeting SAE J1040 and FOPS meeting SAE J231 is required	D.2.1.2		
8	<b>Machines manufactured after Aug. 1, 1996</b> Fully enclosed cab with wire mesh or safety glazing required	D.2.1.2		
9	<b>Machines manufactured before Aug. 1, 1996</b> Protective canopy is constructed to protect the operator from injury due to falling trees, limbs, saplings or branches which might enter the compartment side areas and from snapping winch lines or other objects	D.2.1.2		
10	<b>Machines manufactured before Aug. 1, 1996</b> Lower portion of the cab is fully enclosed with solid material, except at entrances, to prevent the operator from being injured from obstacles entering the cab	D.2.1.2		

**Minimum Requirements – continued****Yes No**

			Yes	No
11	<b>Machines manufactured before Aug. 1, 1996</b> Upper rear portion of the cab fully enclosed with open mesh material with openings of such size as to reject the entrance of an object larger than 2 inches in diameter	D.2.1.2		
12	<b>Machines manufactured before Aug. 1, 1996</b> Open mesh extended forward as far as possible from the rear corners of the cab sides so as to give the maximum protection against obstacles, branches, etc., entering the cab area	D.2.1.2		
13	<b>Cab:</b> Each machine shall have a second means of egress.	D.2.1.2		
14	<b>Tank:</b> Securely attached to the chassis. Fiberglass or plastic tanks must be surrounded by steel to prevent puncture damage	D.2.1.2		
15	<b>Fill Pipe:</b> 4-inch minimum	Exhibit M		
16	<b>Dump Valve:</b> 3-inch minimum. Capable of dumping into a port-a-tank	Exhibit M		
17	<b>Fire Extinguisher:</b> 2A 10BC, securely mounted to the vehicle, accessible to the operator and with current annual inspection tag	D.2.1.2		
18	<b>Flashlight</b>	D.2.1.2		
19	<b>Water:</b> At least 1-gallon drinking water	D.2.1.2		
20	<b>First aid kit:</b> 5 person minimum	D.2.1.2		
21	<b>Boots:</b> All Leather, 8" high with lug type sole in good condition			
22	<b>PPE:</b> <input type="checkbox"/> Hard Hat <input type="checkbox"/> Gloves <input type="checkbox"/> Eye Protection <input type="checkbox"/> Hearing Protection <input type="checkbox"/> Headlamp with Batteries	D.2.1.2		
23	<b>Fire Shelter:</b> New generation	D.2.1.2		
24	<b>Flame Resistant Clothing:</b> A minimum of two full sets of flame-resistant shirt and pants certified to NFPA 1977 standard.	D.2.1.2		

**Equipment Inventory (Exhibit M)**

25	<b>Inventory:</b> Permanently mark their equipment inventory with vendor/company information. Acceptable markings shall be etched or engraved. Painting or marking the equipment with permanent markers is not acceptable.	D.2.1.2		
26	<b>Hose Reel:</b> Operational, minimum 150 feet of 1 inch hard line hose with 3/4" inside diameter			
27	<b>Hose, 1½-inch:</b> <input type="checkbox"/> 300 ft (Type 1 and 2 ONLY)			
28	<b>Hose, 1-inch:</b> <input type="checkbox"/> 300 ft (Type 1 and 2) <input type="checkbox"/> 200 ft (Type 3 and 4)			
29	<b>1 Shovel</b>			
30	<b>1 Pulaski</b>			
31	<b>1 Hose Clamp: Forestry type</b>			
32	<b>1 Spanner Wrench: Combination 1-inch to 1 1/2-inch</b>			
33	<b>2 Nozzles: Combination fog/straight stream, 1-inch NPSH Female</b>			
34	<b>1 Fitting: Double Male, 1-inch NPSH</b>			
35	<b>1 Fitting: Double Female, 1-inch NPSH</b>			
36	<b>1 Reducer: 1½-inch NH Female to 1-inch NPSH Male</b>			
37	<b>1 Reducer: 1-inch NPSH to ¾-inch (garden hose)</b>			
38	<b>1 Adapter: 1-inch NH Female to 1-inch NPSH Male</b>			

<b>Equipment Inventory – continued</b>		Yes	No
39	<b>1 Adapter: 1-inch NPSH Female to 1-inch NH Male</b>		
40	<b>Pump Type:</b> <input type="checkbox"/> Auxiliary <input type="checkbox"/> Power Take Off (PTO)	D.2.1.2	
41	<b>Auxiliary pump (if equipped):</b> Fuel to operate pump, minimum 5 gallons and pump accessories (i.e. Pliers, Oil, Screwdrivers etc.)		
42	<b>Pump:</b> Discharge Pressure Gauge	D.2.1.2	
43	<b>Pump:</b> 20 foot suction hose		
44	<b>Discharge Outlet:</b> 1 ½” NH (Type 1 and 2) <b>1-inch NPSH</b> (Type 3 and 4)	D.2.1.2.2	
45	<b>Lighting: Minimum 2 rear, 2 forward</b> Operational, lights must be mounted to the equipment in such a way to provide illumination beyond the blade or working area	D.2.1.2	
46	<b>Back-Up Alarm:</b> 87 decibel	D.2.1.2	

*Optional Items*

47	<b>Winch or Grapple:</b> Operable	D.2.1.2.3	
48	<b>Foam Proportioner System:</b> Manual <input type="checkbox"/> Automatic <input type="checkbox"/>	D.2.1.2.3	
49	<b>Compressed Air Foam System:</b>	D.2.1.2.3	
50	<b>Drop Tank Skidgine:</b> Type 3 or 4 only and must also have a grapple	D.2.1.2.2	

Equipment meets agreement specifications       Equipment does not meet agreement specifications

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_  
(Print and sign)

Contractor: \_\_\_\_\_ Date: \_\_\_\_\_  
(Print and sign)

Contractor given the opportunity to correct noted deficiencies (*See Remarks*)

Contactor successfully corrected noted deficiencies

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

**REMARKS:** \_\_\_\_\_  
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**SKIDGINE**

<b>REQUIREMENTS</b>	<b>TYPE 1</b>	<b>TYPE 2</b>	<b>TYPE 3</b>	<b>TYPE 4</b>
Tank Capacity (gallons)				
Minimum	1,200	800	400	200
Maximum	NONE	1,199	799	399
Pump Min Flow (gpm)	50	50	30	30
@ rated pressure (psi)	100	100	70	70
1" hard line with 3/4" inside diameter hose on reel	150 feet	150 feet	150 feet	150 feet
1 1/2 inch linen hose	300 feet	300 feet	-	-
1 inch linen hose	300 feet	300 feet	200 feet	200 feet
Discharge Outlet	1 1/2 inch NH	1 1/2 inch NH	1 inch NPSH	1 inch NPSH
Pump and Roll	Yes	Yes	Yes	Yes
Foam Proportioner System	Optional	Optional	Optional	Optional
Winch	Not required	Not required	Optional	Optional
Grapple	Not required	Not required	Optional	Optional
Drop tank with Grapple	Optional	Optional	Optional	Optional
Personnel Required	1	1	1	1