

#### Kentucky Fire Commission Application for Live Fire Training

This completed application must be submitted

15 working days prior to any acquired structure live fire training being conducted

Name of Fire Department Conductin	g Training:	
Address of Department:		
Location of Training:		
County of Training:	Date of Training:	Time of Training:
Lead Instructor:	Contact Number: _	
List all other instructors that will be a	assisting in this training: 1	
2	_3	_4
5	_6	_7
8		

Each Department Shall Maintain Copies of the Following Documentation:

- 1. Copies of all paperwork submitted to the Kentucky Division of Air Quality (if required)
- 2. A detailed lesson plan of the training that will be conducted
- 3. Copy of permission forms to participate in live fire training
- 4. Copy of proof of a clear title (if required)
- 5. Copy of Certificate of Cancellation of Insurance on the structure (if required)
- 6. Site plan drawing of the burn site (if required)
- 7. Floor plan drawing of the burn site detailing all rooms, hallways, and exterior openings (if required)
- 8. Asbestos abatement and inspection clearance (if required)

# By signing this application, I attest to the best of my knowledge that NFPA 1403 is followed during this live fire training exercise.

Lead Instructor	Date	Fire Chief or Designee Date
Fire Commission Designee	Date	Regional Training Coordinator Date
	Kentucky F	ations to the following: Fire Commission Rudder or Ericka Cole
	118 James Court	, Lexington, KY 40505 red to: 1-859-256-3125



Name of Fire Department:	
Location (Address) of Training:	
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, identity location of disposal:

#### Property Owner of Burn Site:

Submit the following to the appropriate Division for Air Quality **REGIONAL OFFICE CONTACTS** 

- 1. Completed, signed KY Fire Training Commission: Application for Live Fire Training.
- 2. Copy of an 8 <sup>1</sup>/<sub>2</sub> X 11 Topographical Map that shows location of proposed fire training. (A clearly drawn sketch of the location may be substituted for the map.)
- 3. Asbestos survey report
- 4. Analytical report of samples analyzed for asbestos

#### Signature of Person Requesting approval of fire training



Address:
Date:
Time:
Lead Instructor:
Instructor Number:

### Permits, Documents, Notifications, Insurance

- Secure the following written documentation from the owner:
  - o Permission to burn structure
  - Proof of clear title
  - o Certificate of insurance cancellation
  - Acknowledgement of post-burn property condition
  - Debris removal is the responsibility of the property owner

#### • Obtain the following:

- o Local burn permit
- o Permission to utilize fire hydrants
- o Authority to block off roads
- Assistance in traffic control
- Liability insurance covering damage to other property
- Written evidence of prerequisite training obtained from participating students from outside agencies
- Notify the following of date, time and location of burn:
  - Appropriate dispatch office
  - All affected police agencies
  - Owners and users of adjacent property
- Ensure application and proper paperwork is sent to Division of Air Quality Office at least 15 working days prior to the planned date of the live fire training. The application and more information can be found on their website: <u>https://eec.ky.gov/Environmental-Protection/Air/Pages/Fire-Training.aspx</u>



Address:
Date:
Time:
Lead Instructor:
Instructor Number:

## **Pre-Burn Planning**

#### Pre-Burn plans made, showing the following:

- Site plan drawing, including all exposures
- Building plan, including overall dimensions
- Floor plan detailing all rooms, hallways, and exterior openings
- Location of command post
- Position of all apparatus
- Position of all hoses, including backup lines
- Location of emergency escape routes
- Location of emergency evacuation assembly area
- $\circ~$  Location of ingress and egress routes for emergency vehicles
- Available water supply determined
  - Primary water source \_\_\_\_
- Ensure separate water sources established for attack and backup hose lines
- $\circ~$  Determine required water flow for the burn building and exposure buildings
  - Critical flow = building Length X Width X Height/100 = \_\_\_\_\_GPM
- Required reserve flow determined (50 percent of fire flow) \_\_\_\_\_GPM
  - There must be a minimum of 3000 gallons held in reserve
- Obtain periodic weather reports
- $\circ~$  Designate and mark parking areas
- Establish operations area and mark perimeter
- Communications frequencies established



**Building Floor Plan & Evolution Setup** 

Address:	
Date:	
Time:	
Lead Instructor:	
Instructor Number:	



Address:	
Date:	
Time:	
Lead Instructor:	
Instructor Number:	

<b>KENTUCKY FIRE</b>
COMMISSION STATE FIRE RESCUE TRAINING
Kentucky Fire Commission
Live Fire Checklist
<b>Evolution Objectives</b>

Address:	
Date:	
Time:	
Lead Instructor:	
Instructor Number:	

Objective 1:			
Objective 2:			
Objective 3:			
Objective 4:			
Objective 5:			

<b>KENTUCKY FIRE</b>
COMMISSION
STATE FIRE RESCUE TRAINING
Kentucky Fire Commission
Live Fire Checklist
<b>Evolution Objectives</b>

Address: _	
Date:	
Time:	
Lead Instru	uctor:
Instructor	Number:

Objective 6:			
Objective 7:			
Objective 8:			
Objective 9:			
Objective 10:			



# Information and forms found after this

# page in the application

## packet are to be completed and

kept for internal use only by the

fire department conducting live burn training.

These forms do NOT need to

be submitted with the

**Application for Live Fire Training.** 



Address:
Date:
Time:
Lead Instructor:
Instructor Number:

## **Training Structure Preparation**

- Building inspected to ensure structural integrity
- o All utilities disconnected
- $\circ~$  Highly combustible interior wall and ceiling coverings removed
- All holes in walls and ceilings patched
- Materials of exceptional weight removed from above training areas (or areas sealed off from activity)
- Precut ventilation openings of adequate size for each separate roof area
- Windows checked and operated, opened, or closed as needed
- Building components checked and operated
- Stairways made safe with railings in place
- Chimney checked for stability
- Fuel tanks and closed vessels removed or adequately vented
- Unnecessary inside and outside debris removed
- Porches and outside steps made safe
- Cisterns, wells, cesspools, and other ground openings fenced or filled
- o Hazards from toxic weeds, hives, and vermin eliminated
- Hazardous trees, brush, and surrounding vegetation removed
- Exposures such as buildings, trees, and utilities removed or protected
- o All extraordinary exterior and interior hazards remedied
- Fire set with prepared class A materials only; no flammable or combustible liquids, no contaminated materials



Address:
Date:
Time:
Lead Instructor:
Instructor Number:

### **Pre-Burn Procedures**

All burns shall be conducted in compliance with NFPA 1403

- All participants briefed on the following:
  - Training structure layout and safety rules
  - Crew and instructor assignments
  - o 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 an adequate number of personnel
- o All necessary tools and equipment placed into position
- Participants must be checked for:
  - Approved full protective clothing
  - Approved self-contained breathing apparatus (SCBA)
  - o 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 other participants
- Ensure property owner has signed Acquired Building Release form



Address:
Date:
Time:
Lead Instructor:
Instructor Number:

### **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
- o Prepare records and reports, if required
- 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.

KENTUCKY FIRE COMMISSION STATE FIRE RESCUE TRAINING
Kentucky Fire Commission
Live Fire Checklist

Address:
Date:
Time:
Lead Instructor:
Instructor Number:

## **Responsibilities of Personnel**

#### Instructor-In-Charge:

- Plan and coordinate all training activities
- Monitor activities to ensure safe practices
- $\circ~$  Inspect building integrity prior to each fire
- Assign instructors to:
  - Attack hose lines
  - o 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
  - o EMS
  - Communications
  - Water supply
  - o Apparatus staging
  - o Breathing apparatus
  - Incident rehabilitation
  - Public relations
- Ensure adherence to this standard by all persons within the training area
- $\circ~$  No alcohol consumption at any training
- $\circ~$  No persons under the influence of drugs or alcohol allowed to participate

#### Safety Officer

- Prevent unsafe acts
- Eliminate unsafe conditions
- Intervene and terminate unsafe acts
- Supervise additional safety personnel as needed
- Coordinate lighting of fires with instructor-in-charge
- Ensure compliance of participant's personal protective equipment with applicable standards
  - Protective ensemble
  - o SCBA
  - o Personal alarm devices
- Ensure that all participants are accounted for, both before and after each evolution
- $\circ~$  No alcohol consumption at any training
- No persons under the influence of drugs or alcohol allowed to participate

#### Instructor

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

#### Student

- o Acquire prerequisite training
- Become familiar with building layout
- o 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
- $\circ~$  No alcohol consumption at any training
- $\circ~$  No persons under the influence of drugs or alcohol allowed to participate

KENTUCKY FIRE COMMISSION STATE FIRE RESCUE TRAINING Kentucky Fire Commission Live Fire Checklist 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:	

Address:	
Date:	
Time:	
Lead Instructor:	
Instructor Number:	

## **Student Group Assignments**

	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.	

KENTUCKY FIRE
COMMISSION STATE FIRE RESCUE TRAINING
Kentucky Fire Commission
Live Fire Checklist
Accountability

Address:	
Date:	
Time:	
Lead Instructor:	
Instructor Number:	

# **Student Group Assignments**

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.

<b>KENTUCKY FIRE</b>
COMMISSION STATE FIRE RESCUE TRAINING
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Live Fire Checklist
Accountability

Address:	
Date:	
Time:	
Lead Instructor:	
Instructor Number:	

# Student Group Assignment

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.

<b>KENTUCKY FIRE</b>
COMMISSION STATE FIRE RESCUE TRAINING
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Accountability

Address:	
Date:	
Time:	
Lead Instructor:	
Instructor Number:	

# **Student Group Assignments**

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

	Group 11
1.Team Leader:	
2.	
3.	
4.	
5.	

Group 12	
1.Team Leader:	
2.	
3.	
4.	
5.	