

# Fire Chemical Intrusion Report-Terrestrial Site Assessment

Intrusion Date:

Field Assessment Date:

Incident Name

Incident Number:

Intrusion Latitude:

Intrusion Longitude:

Chemical Coverage Level:

Gallons per 100 square feet

Agency:

Unit:

(National Forest)

Area:

Subunit:

Description of intrusion into avoidance area:

Vegetation Type:

Non-Invasive Species Present?

Retardant Visible on Vegetation?

Non-Native Species Near?

Vegetation Burned?

Non-Native Invasive Species Names:

% Ground cover remaining

% Canopy remaining:

Species or critical habitat in avoidance area:

Post application weather events:

Environmental Effects:

Species specific terms and conditions or reasonable/prudent measures associated with species as described in the BO where this occurred?:

Species: with Take Expected

Adverse impacts to T&E species?

Take of T&E species expected?

Amount of habitat or count of individuals:

Take exceeds authorized amount?

Species wide ranging in other forests?:

Other Forests/Regions notified?:

FWS Office:

FWS Staff:

FWS Contact date:

FWS: Summary of Communication (Phone/Email/Meeting):

Is follow-up monitoring required as a Term and Condition or RPM associated with the BO or recommend by resource advisor completing this evaluation?

State or Other Agency Notification:

Additional Information:

Reporting Name:

Reporting Email:

Reporting Phone: