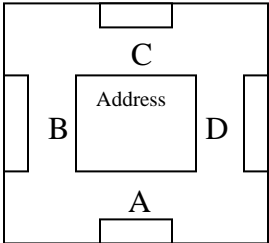


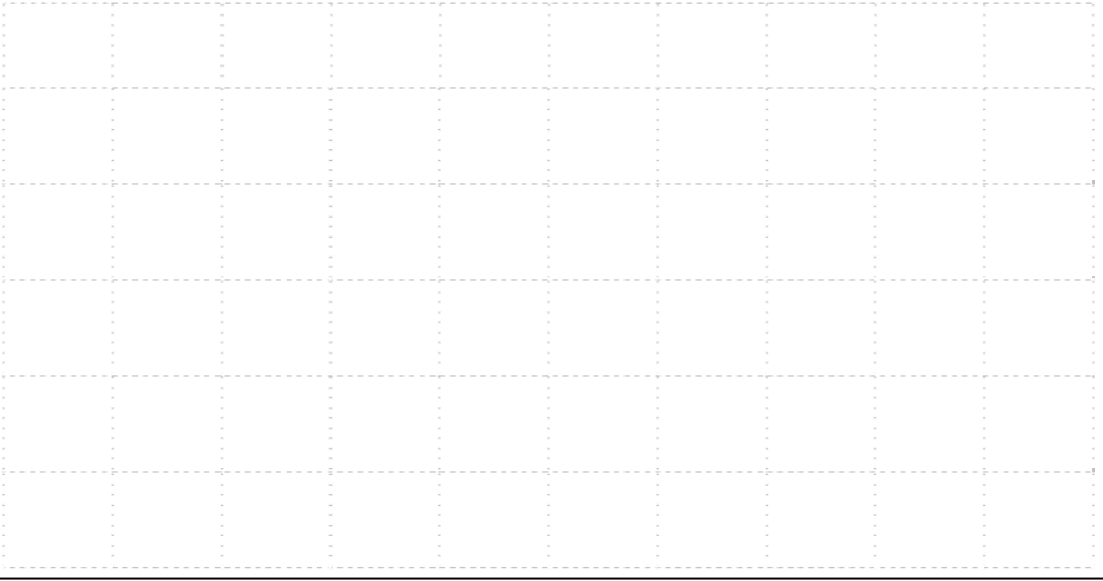

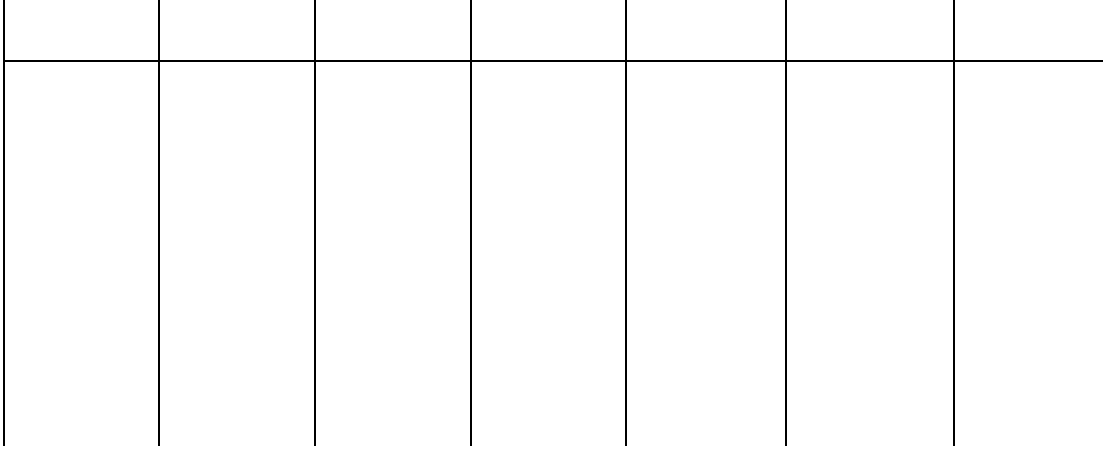
Corpus Christi Fire Department

Tactical worksheet

Date _____ Incident# _____ Address _____ Occupancy _____

<p>Personnel Accountability Report</p> <p><input type="checkbox"/> All Clear _____</p> <p><input type="checkbox"/> Under Control _____</p> <p><input type="checkbox"/> Offensive to Defensive</p> <p><input type="checkbox"/> 20 Minute Mark</p> <p><input type="checkbox"/> Hazardous event (Notifications)</p> <p><input type="checkbox"/> Missing Firefighter</p> <p><input type="checkbox"/> Structural Integrity</p>	<p>Time: _____ Results: _____</p> <p>Time: _____ Results: _____</p> <p>Time: _____ Results: _____</p> <p>Time: _____ Results: _____</p> <p>Time: _____ Results: _____</p>	
<p>Building Evacuation PAR</p> <p>Time: _____ Results: _____</p>		

<p><input type="checkbox"/> Command</p> <p><input type="checkbox"/> Accountability</p> <p><input type="checkbox"/> IAP</p> <p>Strategy</p> <p><input type="checkbox"/> Offensive</p> <p><input type="checkbox"/> Defensive</p> <p>Search</p> <p><input type="checkbox"/> Primary</p> <p><input type="checkbox"/> Secondary</p>	<p>Fire Attack</p> <p><input type="checkbox"/> Primary Line</p> <p><input type="checkbox"/> Cut Off Line</p> <p><input type="checkbox"/> Fire Control</p> <p>Fire Extension</p> <p><input type="checkbox"/> Checked</p> <p><input type="checkbox"/> Stopped</p> <p>Exposures</p> <p><input type="checkbox"/> Covered</p>	<p>RIT</p> <p><input type="checkbox"/> 2 Out _____</p> <p><input type="checkbox"/> Full RIT _____</p> <p>Water Supply</p> <p><input type="checkbox"/> Established</p> <p>Ventilation</p> <p><input type="checkbox"/> Complete</p> <p>Overhaul</p> <p><input type="checkbox"/> Complete</p>	<p>Utilities</p> <p><input type="checkbox"/> Gas</p> <p><input type="checkbox"/> Electric</p> <p><input type="checkbox"/> Water</p> <p>Salvage/Loss Control</p> <p><input type="checkbox"/> Loss Stopped</p> <p><input type="checkbox"/> Occupant Svc</p> <p>Scene Safe</p> <p><input type="checkbox"/> _____ Hrs.</p>
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1 st Alarm							
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D/C							
D/C							
2 nd Alarm							
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A/C							
C/V							
L&A							
Other Equip							
Accountability							
Location							