

Date: \_\_\_\_\_ Time: \_\_\_\_\_ E # \_\_\_\_\_

Incident Name: \_\_\_\_\_ Incident # \_\_\_\_\_

Company /  
Contractor: \_\_\_\_\_ Equipment ID: \_\_\_\_\_

Agreement # \_\_\_\_\_ Equipment Make: \_\_\_\_\_

VIN/Serial # \_\_\_\_\_ Equipment Model: \_\_\_\_\_

**EQUIPMENT TYPE**
☐ Type 1      ☐ Type 2      ☐ Type 3

REQUIREMENTS	TYPE 1	TYPE 2	TYPE 3
Tank Capacity (gallons) <i>Minimum</i>	500	325	200
<i>Maximum</i>	NONE	499	324
Flywheel HP Range	200	100-199	60-99
Pump Min Flow (gpm)@ rated pressure (psi)	30 70	30 70	30 70
1" hard line with 3/4" inside diameter hose on reel	150 feet	150 feet	150 feet
1 inch linen hose	200 feet	200 feet	200 feet
Discharge Outlet	1" NPSH	1" NPSH	1" NPSH
Pump and Roll	Yes	Yes	Yes
Foam Proportioner System	Optional	Optional	Optional
Winch or Grapple	Optional	Optional	Optional
Personnel Required	1	1	1

**MINIMUM EQUIPMENT REQUIREMENTS**

	<i>Not all inclusive; for additional clarification refer to the agreement (SF-1449 section D).</i>		Yes	No
1	<b>Equipment VIN/serial # matches resource order</b> (Schedule of Items)	D.6.3.1		
2	<b>Check-in process completed</b>	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>Personnel:</b> Full Name & RT-130 Fire Line Refresher Completion Date Operator Name: _____ Date: _____	D.3.1.1		
6	<b>Tank:</b> Securely attached to the chassis. <i>Fiberglass or plastic tanks must be surrounded by steel to prevent puncture damage.</i>	D.2.1.2		

## VIPR Fire Equipment Incident Compliance Inspection Checklist

## PUMPER CAT

7	<b>Lighting:</b> 2 forward & 2 rear, mounted to the equipment in such a way to provide protection from damage and provide illumination beyond the work area.	D.2.1.2		
8	<b>Back-Up Alarm</b>	D.2.1.2		
9	<b>Pump &amp; Roll:</b> Equipment must be able to pump water and foam while moving.	Inventory List		
10	<b>Dump Valve:</b> 3-inch minimum, capable of dumping into a port-a-tank.	D.2.1.2.3		
11	<b>Discharge Outlet:</b> 1-inch NPSH	D.2.1.2.3		
12	<b>Fill Pipe:</b> 4-inch minimum	D.2.1.2.3		
13	<b>Programmable Radio:</b> One (1) handheld programmable radio with two (2) fully charged battery packs.	D.2.1.2		
14	<b>Boots:</b> All leather, 8" high with lug type sole in good condition.	D.2.1.2		
15	<b>PPE:</b> <i>For ALL personnel</i> Hardhat, Gloves, Hearing Protection, Eye Protection, Headlamp w/batteries	D.2.1.2		
16	<b>Flame resistant clothing:</b> <i>Minimum 2 full sets</i> of flame-resistant shirts and pants certified to NFPA 1977 standard <i>for ALL personnel.</i>	D.2.1.2		
17	<b>Fire shelter:</b> New Generation, <i>for ALL personnel.</i>	D.2.1.2		
18	<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		
19	<b>First aid kit:</b> 5 person minimum	D.2.1.2		
20	<b>Pump Type</b>	D.2.1.2	Auxiliary	PTO
21	<b>Pump Discharge Pressure Gauge</b>	D.2.1.2		
22	<b>Fuel and Tool kit for pump (if equipped with Auxiliary Pump):</b> Minimum 5 gallons and Pump accessories ( <i>i.e., Pliers, Oil, Screwdrivers etc.</i> )	D.2.1.2		
MINIMUM INVENTORY				
23	<b>2 – Nozzle, combo fog/straight stream, 1" NPSH Female</b>	Inventory List		
24	<b>1 – Double Male, 1" NPSH</b>			
25	<b>1 – Double Female, 1" NPSH</b>			
26	<b>1 – Reducer, 1 ½" NH Female to 1" NPSH Male</b>			
27	<b>1 – Reducer, 1" NPSH Female to ¾" Garden Hose Male</b>			
28	<b>1 – Adapter, 1" NH Female to 1" NPSH Male</b>			
29	<b>1 – Adapter, 1" NPSH Female to 1" NH Male</b>			
30	<b>1 – Spanner Wrench, combination 1" &amp; 1 ½"</b>			
31	<b>1 – Fire Hose Clamp, Forestry</b>			
32	<b>1" Hose – 200'</b>			
33	<b>1 – 20' Suction hose with strainer or screened foot valve</b>			

## VIPR Fire Equipment Incident Compliance Inspection Checklist

## PUMPER CAT

34	<b>Live Hose Reel</b> – Operational with min. of 100’ of 1” hose (non-collapsible/hardline) with ¾” inside diameter		
35	<b>1 – Shovel, size “0”</b>		
36	<b>1 – Pulaski</b>		
37	<b>All inventory permanently etched or engraved with company information. <i>Painting or marking the equipment with permanent markers is not acceptable.</i></b>		
38	<b>Vendor maintains a complete inventory list, including any extra items they may be carrying.</b>		
<b>OPTIONAL ATTRIBUTES</b>			
39	<b>Winch or Grapple that is operable.</b>	D.2.1.2.3 D.6.2	
40	<b>Foam Proportioner System:</b> <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	D.2.1.2 D.6.2	
41	<b>Compressed Air Foam System</b>	D.2.1.2.1	

☐ Equipment meets agreement specifications      ☐ Equipment does not meet agreement specifications

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_  
*Print* *Sign*

Operator: \_\_\_\_\_ Date: \_\_\_\_\_  
*Print* *Sign*

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

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_  
*Print* *Sign*

**REMARKS:** (*Note in detail any deficiencies, pertinent information, comments, etc.*)
