

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

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

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

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

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

Drivers Full Name: \_\_\_\_\_

**EQUIPMENT TYPE**

	<b>Pickup, Type 1</b> GVWR ≥ 8,501 to 19,500 lbs., min. 72” bed length						<b>AWD/4WD</b>
	<b>Pickup, Type 2</b> GVWR 6,001 to 8,500 lbs., min. 66” bed length						<b>AWD/4WD</b>
	<b>Pickup, Type 3</b> GVWR ≤ 6,000 lbs., min. 60” bed length						<b>AWD/4WD</b>
	<b>Passenger Van</b> 7-9 passenger						<b>AWD/4WD</b>
	<b>SUV/Sport Utility Vehicle</b> Min. 5 passenger						<b>AWD/4WD</b>
	<b>Stakeside, Type 1</b> GVWR ≥ 14,001-26,000 lbs.		<b>Dump/Tilt Bed</b>		<b>Lift Gate</b>		<b>AWD/4WD</b>
	<b>Stakeside, Type 2</b> GVWR ≥ 10,001-14,000 lbs.		<b>Dump/Tilt Bed</b>		<b>Lift Gate</b>		<b>AWD/4WD</b>

**MINIMUM EQUIPMENT REQUIREMENTS**

	<i>Not all inclusive; for additional clarification refer to the agreement (SF-1449 section D).</i>		<b>Yes</b>	<b>No</b>
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		

## VIPR Fire Equipment Incident Compliance Inspection Checklist

## VEHICLE WITH DRIVER

6	<b>Vehicle Identification:</b> All equipment shall have the company's name and unique identification number affixed to the transport (not the piece of equipment) on each side of the vehicle.	D.2.2.5		
7	<b>Bed:</b> The full bed of the truck is available for incident use.	D.2.1.1		
8	<b>Spare Tire, Wheel Wrench, Jack</b>	D.2.1.1		
9	<b>Tie Downs, Straps and/or Netting</b> (securing load)	D.2.1.1		
10	<b>Boots:</b> All leather, 8" high with lug type sole in good condition.	D.2.1.1		
11	<b>PPE:</b> <i>For ALL personnel</i> Hardhat, Gloves, Hearing Protection, Eye Protection, Headlamp w/batteries			
12	<b>Flame resistant clothing:</b> <i>Minimum 1 full set</i> of flame-resistant clothing shirt and pants certified to NFPA 1977 standard for ALL personnel.			
13	<b>Fire shelter:</b> New Generation, <i>for ALL personnel.</i>			
14	<b>Fire extinguisher:</b> 2A 10BC, securely mounted to the vehicle, accessible to the operator and with current annual inspection tag. <b>DATE:</b>	D.2.2.4		

☐ 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*)      ☐ Contactor successfully corrected noted deficiencies

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

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