

Jackson Hole Fire/EMS

Station /Apparatus NO RESPONSE INCIDENT REPORT

Report Date: _____ Time: _____ Incident Accident

Location: _____

Apparatus Involved: MS Unit #: _____ Fire Unit #: _____

NFIRS Report #: _____

Type of Incident

(Describe): _____

Time of Day

(Describe): _____

Description of the incident:

Apparatus called but did not respond due to :

Inadequate staffing No personnel available No ADO available No Officer available

Station Leadership contacted Chief and/or Duty Officer contacted

Member making report: _____

Signature: _____