



# IDAHO COOPERATIVE MOBILIZATION AGREEMENT

**Agreement #**  
**ID-EIS-ICMA-054-2025-**  
**06**  
**Term: 5/1/2025 - 4/30/2026**

## Fire Department / District (Cooperator)

### Contact

Franklin County Fire District  
55 West 1st South  
Preston, ID 83263

Business Phone: 208-852-3111 After Hours Phone: 208-406-6528

### Workers Compensation

### Representative

Randon Naegle

### District Fire Warden

### Memo

## State Area Office (ADO Payment Office)

### Contact

Idaho Department of Lands  
Fire Management Bureau  
3284 W. Industrial Loop  
Coeur d'Alene, Idaho 83815

### Home Unit Office (Owner)

Eastern Supervisory Area Office  
Attn: Katina Kienlen-Hoffer, khoffer@idl.idaho.gov (Cell: 208-569-9619)  
3563 E. Ririe Highway  
Idaho Falls, Idaho 83401

Business Phone: 208-525-7167

### Local Dispatch (Provider)

South-Central Dispatch  
Eastern Idaho Dispatch  
Central Idaho Dispatch

## Resources

The following is being provided:



Operated (includes  
Personnel & Equipment)



Unoperated (Personnel  
Costs Billed Separately)



Unoperated - FSO Bills  
Payroll Costs Portal-To-  
Portal

Time Period: Fire Season '25

Kind	Type	Description	Rate	Dev Rate	Rate per Staff	Rate per Mile	Max Daily Rate	Staffing (min/max)	Inspection Exp Date	Active
Support Water Tenders	S2 - Operated	Engine 102 2003 Kenworth T800 1NKDLB0X04J053264 FCF2003 Standard Staffing: 2 Size: 62,000	\$140.00 /Hour	-	\$0.00	-	\$0.00	1/3		Yes
Wildland Engines	WE6 - Operated	Brush 102 2016 Dodge Ram 4500 3C7WRLEJ5HG552008 F2998 Standard Staffing: 3 Size: 16,500	\$136.00 /Hour	-	\$0.00	-	\$0.00	2/5		Yes

## General Provisions

Cooperator will adhere to terms set forth on the General Provisions and Instructions form.

No general provisions

## Special Provisions

Cooperator will adhere to terms set forth on the General Provisions and Instructions form.

No special provisions

## Approved By

By signing electronically, I am certifying that the equipment and personnel mobilized under this Agreement meet the minimum resource typing and standards as required by the Idaho Cooperative Mobilization Agreement (ICMA) and agree to all terms and conditions of said agreement. Furthermore, I certify that I am authorized to sign on behalf of my agency.

Cooperators create a user account, agreeing to program terms and conditions. Cooperators select equipment and positions to complete the form. Review and approval by the State is indicated by the signature.

**Signed 06/11/2025 14:08:30 MDT by Randon Naegle**

**ID Approval 06/11/2025 14:51:43 MDT by Katina Kienlen-Hoffer**

