



IDAHO COOPERATIVE MOBILIZATION AGREEMENT

Agreement #
ID-EIS-ICMA-051-2025-
06
Term: 5/1/2025 - 4/30/2026

Fire Department / District (Cooperator)

Contact

McCammon Fire Department
100 Center St
McCammon, ID 83250

Business Phone: 208-220-2749 After Hours Phone: 280-220-2749

Workers Compensation

Representative

Johnny Ketner 208-220-2749

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)

Eastern 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	283 1986 International S1900 1HTLDUYP2GHA64813 C18473 Standard Staffing: 2	\$140.00 /Hour	-	\$0.00	-	\$0.00	1/3		Yes
Wildland Engines	WE4 - Operated	484 2002 Stewart & Stevenson LMTV A- t017418EFDM Standard Staffing: 3 Features: 4X4	\$176.00 /Hour	-	\$0.00	-	\$0.00	2/4		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 04/30/2025 12:49:02 MDT by Johnny Ketner

Amendment #06