



**ID Forestry and Fire Management  
IDAHO COOPERATIVE MOBILIZATION AGREEMENT**

**Agreement #  
ID-SWS-ICMA-005-  
2026**

**Term: 5/1/2026 - 4/30/2027**

**Fire Department / District (Cooperator)**

**Contact**

Thorn Creek Volunteer Fire Department  
Thorn Creek VFD  
76 Thorn Creek Road  
Boise , ID 83716

Business Phone: 208-392-4229 After Hours Phone: 208-392-4229

**Workers Compensation**

**Representative**

Dan Cano 208-392-4229

**District Fire Warden**

Casper Urbanek 208-334-3488

**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)**

Southwest Supervisory Area Office  
8355 W. STATE STREET  
BOISE, Idaho 83714

Business Phone: 208-334-3488

**Local Dispatch (Provider)**

Boise 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 '26

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	E-1121 2010 Navistar 6x6 tender/tanker 3000 gal. 500 gpm metered foam 1htwjazr8aj208107 f1753 Standard Staffing: 2 Size: 53000 lbs	\$140.00 /Hour	-	\$0.00	-	\$0.00	1/3		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 04/15/2026 12:59:04 MDT by Dan Cano**

**ID Approval 04/15/2026 14:41:56 MDT by Casper Urbanek**

**Amendment #01**