

**U.S. Department of Interior  
Bureau of Land Management  
INDIVIDUAL FIRE REPORT  
TRESPASS INVESTIGATION SUBFORM  
For Human-Caused Type 1 Fires**

Reporting requirements: No shading = mandatory fields; light shading = optional.

BLM Fire Report Information (Copy from Fire Report)	State and Field Office	Calendar Year	Fire Code
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**FIRE CAUSE INFORMATION**

Fire Cause Code (General – Specific)
Other Cause (if the specific fire cause selected above is "Other, known")
Suspect Classification

**CASE INFORMATION**

Status
If there is a case, you must provide the trespass case number. Format: aannn-10-nnnn Trepass Case Number
If there is not a case, you must provide the name and title of the Field Office/District Manager and the rationale for the decision. Authorized by Name <span style="float:right">Title</span> Rationale

**BILLING INFORMATION**

	\$ Amount	Date
Billed		
Recovered		
Received by BLM		

**REMARKS**

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