|  |  |  |
| --- | --- | --- |
| **1. Incident Name:** | **2. Operational Period:** **(** **Date / Time )** | **ASSIGNMENT LIST****ICS 204 - EPA** |
|  | From:      To:       |  |
| **3. Branch:** | **4. Division/Group/Staging:** |
|  |  |
| **5. Operations Personnel:**   |
| ICS Position | Name | Affiliation | Contact # (s) |
| Operations Section Chief: |       |       |       |
| Branch Director: |       |       |       |
| Division/Group Supervisor/STAM: |       |       |       |
| **6. Resources Assigned: “X” indicates 204a attachment with additional instructions** |
| Strike Team/Task Force/Resource Identifier | Leader | Contact Info. # | # of Persons | Reporting Info/Notes/Remarks |
|       |       |       |      |       | [ ]  |
|       |       |       |      |       | [ ]  |
|       |       |       |      |       | [ ]  |
|       |       |       |      |       | [ ]  |
|       |       |       |      |       | [ ]  |
|       |       |       |      |       | **[ ]**  |
| **7. Work Assignments:** |
|  |
| **8. Special Instructions:** |
|  |
| **9. Communications (radio and/or phone contact numbers needed for this assignment):** |
| Name/Function | Radio: Freq./System/Channel | Phone | Cell/Pager |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| **Emergency Communications:** |
| **10. Prepared by: (RESL) (Date / Time)** | **11. Reviewed by: (PSC) (Date / Time )** | **12. Reviewed by: (OPS) ( Date / Time )** |
|              |             |             |
| **ASSIGNMENT LIST ICS 204 – EPA *(Rev 02/10)*** |