|  |  |  |  |
| --- | --- | --- | --- |
| **1. Incident Name:** | **2. Operational Period:** **(Date / Time)** | **3. Demobilization No.:** | **DEMOBILIZATION CHECK-OUT** **ICS 221 - EPA** |
|       | From:      To:       |       |  |
| **4. Unit/Personnel Released** |       | **Contact No:** |       |
|  |  | **Estimated Time of Departure/Arrival:** |       |
| **5. Transportation Method** |       | **6. Actual Release Date/Time:** |  |
| **8. Destination:** | **7. Manifest:**  | **[ ]  Yes, Number:**  **[ ]  No**  |
|        | **9. Notified:** | **[ ]  Agency**  **[ ] Region** **[ ]  Area**  **[ ] Dispatch** **Name:**       **Date:**       |
| **10. Unit Leader Responsible for Collecting Performance Rating:** |       |
| **11. Unit/Personnel:**  |
| ***Demobilization Unit Leader check the appropriate box:*** |
| **Logistics Section** | **[ ]  Supply Unit**       |
|  | **[ ]  Communications Unit**       |
|  | **[ ]  Facilities Unit**       |
|  | **[ ]  Ground Support Unit Leader**       |
|  | **[ ]**       |
| **Finance Section** | **[ ]  Time Unit**        |
| **Planning Section** | **[ ]  Documentation Unit**        |
| **Other** | **[ ]**            |
|  | **[ ]**             |
| **12. Remarks:** |
|       |
| **5. Prepared by:**  | **( Date / Time )** |
| **Name/Position:** | **Signature:** |       |
| **DEMOBILIZATION CHECK-OUT ICS 221 – EPA *(Rev 02/10)*** |