



Assignment List (ICS-204)

1. INCIDENT				2. OPERATIONAL PERIOD			
Name		Number		Date From		Date To	
				Time From		Time To	
4. OPERATIONAL PERSONNEL		Name		Contact #s		3.	
Operations Section Chief						Branch	
Branch Director						Division	
Division/Group Supervisor						Group	
Staging Area Manager						Staging Area	
5. RESOURCES ASSIGNED							
Resource Identifier	Leader	# of Persons	Contact (cell, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information			
6. WORK ASSIGNMENTS							
7. SPECIAL INSTRUCTIONS							
8. COMMUNICATIONS (radio and/or phone contact numbers needed for this assignment)							
Name	Function	Frequency / Number		Remarks			
9. PREPARED BY		Position		Name		Signature	
		Date		Time			