



## OPERATIONAL PLANNING WORKSHEET ICS 215

### 1. INCIDENT/EVENT NAME

### 2. OPERATIONAL PERIOD

From (Date and Time):

To (Date and Time):

3. BRANCH	4. DIVISION / GROUP / OTHERS	5. WORK ASSIGNMENT	6. RESOURCES	PT	AM B	FFT	ET	MT	SR RT								7. OVERHEAD POSITION	8. SPECIAL EQPT. AND SUPPLIES	9. REPORTING LOCATION	10. REQUESTED ARRIVAL TIME
	Div A	Conduct SRR	Required	2	2	5		3	4											
Have			1	1	2		3	1												
Need			1	1	3		0	3												
		Clearing Cluster	Required																	
Have																				
Need																				
			Required																	
Have																				
Need																				
	Div Z	Conduct SRR	Required	2	2			2	4											
Have			2	1			1	1												
Need			0	1			1	3												
			Required																	
Have																				
Need																				
			Required																	
Have																				
Need																				
11. TOTAL RESOURCES REQUIRED		Single Resource	4	4	5			5	8								14. PREPARED BY OSC Name and Signature:			
		ST or TF																		
12. TOTAL RESOURCES ON HAND		Single Resource	3	2	2.	2		4	2								Date Prepared:		Time Prepared:	
		ST or TF																		
13. TOTAL RESOURCES NEEDED TO REQUEST		Single Resource	1	2	3			1	6											
		ST or TF																		