Incident Action Plan

IAP 202

Incident Objectives/Response Priorities

Incident Name:	Date Prepared:	TIME PREPARED
Operational Period:	Operational Period Date/Time: From:	To:

General Control Objectives For The Incident (Include Alternatives)

Other Critical Information for Operational Period

Attachments (*** Required for IAP)

❒ Incident Briefing (ICS 201)	❒ Communications Plan (ICS 205)	❒ Weather/Safety Message
❒ Organizational Assignment List (ICS 203)	❒ ICS Position/Phone Numbers (ICS 205-1) ***	❒ Fact Sheet / Media Release
❒ Task Assignments (ICS 204) ***	❒ Organizational Structure (ICS 207)	❒ _____
# attached____	❒ Schedule of Events (208)	❒ _____
❒ EOC Request/Task Assignments (ICS 204-)	❒ Location Map _____ Location [ICS 209-(3-7)]	❒ _____
# attached____	❒ Situation Status Summary (ICS 209)	

Prepared By: (Name/Title)	**Approved by Incident Commander:**