



Initial Damage Assessment Form: Summary of all hazards in area

Date:		Incident										Page #: ___ Of ___			
Operational Period															
Operational Area (grid, neighborhood street)		Burning	Out	Gas	H2O	Electric	Chemical	Damage*	Collapsed	Injured	Trapped	Dead	Vehicle Access	No Vehicle Access	Building Cleared **
Time	Location/Address	Fires		Hazards			Structures		People			Roads		/X	

*For structure damage: h=heavy, m=moderate, l=light, U=unaffected

****Incident Command:** For each Address, put a slash in the Building cleared column when team dispatched, when inspection is completed and building is cleared put a backslash in the column.



Incident Briefing ICS 201

Date:	Incident	Page #: ___ Of ___
Operational Period		

Prepared By::

Map Sketch:

Current Organization:

Incident Commander:

Team ID:

Summary of Current Actions

Be aware of hazards! Work as a team!

FOR INCIDENT COMMANDER

Source: www.cert-la.com

ACTS REV 10/08/07

Incident Command: Transfer an incident from Damage Assessment sheets. Sketch a map of the incident area, if known, with any hazards. Enter Incident Commander's name under current organization. Give to incident team leader with Assignment Status sheet.

Incident team leader: Sketch a map of the incident area with any hazards, if not done by Incident Command. Summarize the actions of your teams. When incident is complete, return this form, along with Assignment Status, to Incident Command.



Message Form

To:	Message Center Use Only Incident : _____ Time: _____ Date: _____ <input type="checkbox"/> Incoming <input type="checkbox"/> Outgoing
From:	
Time:	
Message Text:	
Action Taken:	

USE CLEAR CONCISE TEXT www.cert-la.com 10/08/01
Examples: assignment completed, additional resources needed, unable to complete, special information/status update.

