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Incident Command Form 201

Incident Briefing

Logo Placeholder Other Agency

1. Incident Name:	**2. Date/Time Initiated:** Date: Time:

3. Map/Sketch (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, over flight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment):

4. Situation Summary (for briefings or transfer of Command):

5. Prepared by:	Signature:
ICS Form 201, Page 1	Date/Time: