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Incident Command Form 209

Incident Status Summary

Logo Placeholder Other Agency

*1. Incident Name:	2. Incident Number:

Additional Incident Definition and Decision Support Information *(continued)*

38. Current Incident Threat Summary and Risk Information for next operational periods. Summarize primary incident threats to life, property, community stability, residences, health care facilities, other critical infrastructure/key resources, commercial facilities, natural and environmental resources, cultural resources, and government/business continuity of operations. Identify incident-related cascading impacts.

12 Hours	
24 Hours	
48 Hours	
72 Hours	
72+ Hours	

39. Critical Resource Needs to meet incident objectives for next operational periods. List resource category, kind, and/or type, and amount needed, in priority order.

12 Hours	
24 Hours	
48 Hours	
72 Hours	
72+ Hours	

40. Strategic Discussion: Explain the overall strategy, constraints, and available information related to:

1) critical resource needs identified above.	
2) the Incident Action Plan and management objectives/targets.	
3) anticipated results.	

Explain major problems such as operational challenges, incident management issues; and social, political, economic, and/or environmental impacts.

41. Planned actions for next operational period:

42. Projected Final Incident Size in Area (i.e. sq. mi.)	
43. Anticipated Incident Management Completion Date:	
44. Projected Significant Resource Demobilization Start Date:	
45. Estimated Incident Costs to Date:	
46. Projected Final Incident Cost Estimate:	

47. Remarks (Additional information to aid decision support - list block number).

* Required when applicable.