



# Incident Command/Unified Command - Instructions for Reporting Forms – State of Indiana

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## II. Introduction

The Incident Command/Unified Command (IC/UC) instructions for reporting forms were designed utilizing Federal Emergency Management Agency (FEMA) Booklet 502-2. This instruction manual will assist emergency response personnel in the use of the IC/UC and the corresponding forms that are utilized during incident operations in the State of Indiana.

These instructions and corresponding forms are companions to the National Incident Management System (NIMS) ICS Field Operating Guide (FOG), FEMA 502-1. This FOG provides general guidance to emergency responders on implementing IC/UC.

The IC/UC instructions and corresponding forms are meant to complement existing incident management programs and do not replace relevant emergency operations plans or existing laws/ordinances. This instruction manual and corresponding forms should not be confused with the Incident Command System, which provides a nation-wide template for responders during emergencies or disasters.

The IC/UC forms are intended to be used as tools at the State/local level for the creation of Incident Action Plans (IAPs), for other incident management activities, and for support and documentation of command and management activities. Personnel using the forms should have a basic understanding of the National Incident Management System (NIMS), including IC/UC, through training and/or experience to ensure they can effectively use and understand these forms. ***The State's IC/UC forms designed with this instruction manual are for use within incident command, and for use in an Area Command. Indiana's web-based software application (WebEOC) serves as the primary vehicle for incident command.***

A general description of each IC/UC form's purpose, suggested preparation, and distribution are included in these instructions, including block-by-block instructions to help clarify specific reporting elements. Clarifying specific reporting elements helps those personnel who may be unfamiliar or need further definition of individual blocks.

The organizational charts contained in the IC/UC forms were created with the flexibility to respond to an expanding incident. However, the flexibility of these organization charts allows modification based on particular incident requirements.

The IC/UC forms include essential elements for use by incident command. The use of these standardized forms is encouraged to promote consistency in the management and documentation of incidents in the spirit of NIMS, and to facilitate effective use of mutual aid.

In some incidents, additional information can be added to the IC/UC forms; and several forms are set up with this capability. The section named "IC/UC Form

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Adaptation, Extension, and Appendices” provides possible mechanisms to adapt, extend, or append the IC/UC forms to meet any unique needs during incident response operations.

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### III. IC/UC Form List

The following table lists all of the IC/UC forms that accompany this instruction manual. IC/UC forms identified with an asterisk (\*) are typically used to help develop the Incident Action Plan (IAP).

<b>Table 1 – IC/UC Form List</b>		
<b>IC/UC Form #</b>	<b>Form Title</b>	<b>Typically Prepared By</b>
IC/UC 201	Incident Briefing	Initial Incident Commander
*IC/UC 202	Incident Objectives	Planning Section Chief
*IC/UC 203	Organization Assignment List	Resources Unit Leader
*IC/UC 204	Assignment List	Resources Unit Leader and Operations Section Chief
*IC/UC 205	Incident Radio Communications Plan	Communications Unit Leader
IC/UC 205A	Communications List	Communications Unit Leader
*IC/UC 206	Medical Plan	Medical Unit Leader (reviewed by Safety Officer)
IC/UC 207	Incident Organization Chart (wall mount size, optional 8½ x 14)	Resources Unit Leader
IC/UC 208	Safety Message/Plan	Safety Officer
*IC/UC 209	Incident Status Summary	Situation Unit Leader
*IC/UC 210	Status Change	Communications Unit Leader
*IC/UC 211	Incident Check In List (optional 8½ x 14 and 11 x 17)	Resources Unit/Check in Recorder
IC/UC 213	General Message (3 part form)	Message Originator
*IC/UC 214	Activity Log (optional 2 sided form)	All Sections and Units
IC/UC 215	Operational Planning Worksheet (optional 8½ x 14 and 11 x 17)	Operations Section Chief
IC/UC 215A	Hazard Risk Analysis Worksheet	Safety Officer
*IC/UC 218	Support Vehicle Inventory (optional 8½ x 14 and 11 x 17)	Ground Support Unit
*IC/UC 219-1 to IC/UC 219-8 (Cards)	Resource Status T-Card (may be printed on cardstock)	Resources Unit
IC/UC 220	Air Operations Summary Worksheet	Operations Section Chief or Air Branch Director

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**Table 1 – IC/UC Form List**

<b>IC/UC Form #</b>	<b>Form Title</b>	<b>Typically Prepared By</b>
IC/UC 221	Demobilization Checkout	Demobilization Unit Leader

### IV. IC/UC Form Adaptation, Extension, and Appendices

The IC/UC forms that are referenced in this instruction manual serve as an all-hazard and multiple discipline function for incident management in the State of Indiana. The IC/UC forms include essential data elements necessary to create a foundation for managing complex incidents, including deployed Incident Management Assistance Team/Incident Management Team members. However, implementing NIMS allows incident management flexibility outside this foundation.

Preparedness activities will include the vetting of IC/UC forms, with these activities coordinated by the Response and Recovery Division and Planning and Assessment Division, IDHS. Future suggestions to revise the IC/UC forms must be approved by the Operations Chief and Director of Operations, Response and Recovery Division; and the Branch Chief, Emergency Planning, Planning and Assessment Division, IDHS.

The following text explains possible mechanisms to adapt, extend, or append the IC/UC forms to meet any unique needs during incident response operations.

#### A. IC/UC Form Adaptation

Departments and agencies/organizations in the State of Indiana may require specialized forms for reporting information on a particular kind of incident. In these instances, creating a geographically-localized or field specific IC/UC form would be beneficial. When form adaptation occurs, organizations are strongly encouraged to use the essential block fields, but clearly indicate how the form has been adapted.

For example, an altered form should clearly indicate in the title that it has been changed to meet a specific need. The title for IC/UC 215A may now read “Hazard Risk Analysis Worksheet, Adapted for Hamilton County HAZMAT Operations”.

#### B. Extending IC/UC Block Fields

Specific block fields may need to be extended to provide additional incident information. If additional information is needed, the form itself should be clearly labeled as an adapted form (see above). Subsequently, block fields must be clearly labeled as unique to the adapted IC/UC form by letters or other indicators.

Examples of block field extensions referencing the ICS 209 - Incident Status Summary form is as follows:

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1. Block 2: Incident Number
2. **Block 2A (adapted): Department/Organization Accounting Number**
3. Block 29: Primary Materials or Hazards Involved (hazardous chemicals, fuel types, infectious agents, radiation, etc.)
4. **Block 29A (adapted): Hazardous Material Code Involved (hazardous chemicals, fuel types, infectious agents, radiation, etc.)**

### C. Creating IC/UC Form Appendices

Certain IC/UC forms may require appendices to include additional incident information. When an appendix is provided as an attachment to a form, the authorizing individual (signature) will approve standardized block fields for such an appendix, and make the form available. The authorizing individual will ensure after action statements recognize appendices that provided additional incident information.

An IC/UC form appendix should be clearly labeled with the form name and title that indicates whether it is an organizational assignment or subject-specific appendix. Appendix block field numbering must begin following the last identified block field in the corresponding IC/UC form.

### V. IC/UC Form Instructions

The following IC/UC form instructions are divided by the list in Table 1 – IC/UC Form List. Each set of instructions describes the purpose, preparation responsibilities, distribution requirements, and important notes. Additional tables provide block-by-block field entry instructions.

**Regardless of the form, time must be entered according to local time, and if applicable, the form preparer must identify the time zone.**

#### A. IC/UC 201 – Incident Briefing

1. Purpose

The Incident Briefing (IC/UC 201) form provides the Incident Commander and the Command and General Staff with basic information regarding the incident situation, command organization chart, and a summary of the resources allocated to the incident. In addition to a briefing document, the Incident Briefing also serves as an initial action worksheet and a permanent record of the initial response to the incident.

2. Preparation

The Incident Briefing is prepared by the Incident Commander for presentation to the incoming Incident Commander along with a more detailed oral briefing.

3. Distribution

After the initial briefing by the Incident Commander to Command and General Staff members, the Incident Briefing is duplicated and distributed to the Branch Directors, Group Supervisors, and appropriate Unit Leaders.

The “Map/Sketch” and “Current Action/Planned Actions” blocks in this form are given to the Situation Unit Leader, while the “Current Organization” and “Resources Summary” blocks are given to the Resources Unit Leader.

4. Notes

The Incident Briefing serves as part of the Incident Action Plan (IAP). If additional pages are needed, use a blank Incident Briefing and renumber pages.

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<b>Table 2 - IC/UC 201 Incident Briefing - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident.
2	Date/Time Initiated	Enter date initiated, as (month/day/year) and time using the 24-hour clock.
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)	Show perimeter and other graphics depicting situational status, resource assignments, incident facilities, and other special information on a map/sketch or with attached maps. Utilize commonly accepted map symbols.
4	Situation Summary (for briefings or transfer of Command)	Enter brief and concise statements that describe the incident situation. Use no more than five (5) sentences.
5	Prepared by	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.
6	Initial Response Objectives	Enter the strategy and tactics used initially during the incident and note any specific problem areas.
7	Current Actions/Planned Actions	Enter the current actions or planned actions and subsequent time to obtain objectives. If additional pages are needed, use another IC/UC 201 form and renumber pages.
8	Current Organization (fill in additional organization as appropriate). <ul style="list-style-type: none"> <li>• Command</li> <li>• Safety Officer</li> <li>• Public Information Officer</li> <li>• Operations Section</li> <li>• Planning Section</li> <li>• Logistics Section</li> <li>• Finance/Admin Section</li> </ul>	Enter on the organization chart the names of the individuals assigned to each position. Modify the chart as necessary, and add any boxes for Command and General Staff Assistants or Unit Leaders, Branch Directors, Groups, and/or ESF Representatives. Indicate Agency for each of the Incident Commanders if Unified Command is being used.
9	Resource Summary	Enter the following information about the resources allocated to the incident. If additional pages are needed, use another IC/UC 201 form and renumber pages.

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<b>Table 2 - IC/UC 201 Incident Briefing - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
	Resource	Enter the number and appropriate category, kind, or type of resource ordered.
	Resource Identifier	Enter the relevant agency designee and/or resource designee (if any).
	Date/Time Ordered	Enter the date as (month/day/year) and time as 24-hour clock that resource was ordered.
	ETA	Enter the Estimated Time of Arrival (ETA) to the incident using the 24-hour clock.
	Arrived	Enter a checkmark upon arrival.
	Notes (Location/Assignment/Status)	Enter notes such as the assigned location of the resource and/or the actual assignment and status.

### **B. IC/UC 202 – Incident Objectives**

1. Purpose

The Incident Objectives (IC/UC 202) form describes the basic incident strategy, incident objectives in priority order, command emphasis, and safety considerations applicable to the next operational period.

2. Preparation

The Incident Objectives form is completed by the Planning Section following each Command and General Staff meeting conducted to prepare the Incident Action Plan (IAP). In cases of a Unified Command, one Incident Commander may approve the incident objectives. If additional Incident Commanders need to sign the Incident Objectives, attach blank pages.

3. Distribution

The Incident Objectives will be reproduced with the IAP and given to all supervisory personnel at the Section, Branch, Group, and Unit levels. All completed original forms must be given to the Documentation Unit, Planning Section.

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### 4. Notes

The Incident Objectives are part of the IAP and can be used as the opening or cover page. If additional pages are needed, use a blank Incident Objectives and renumber pages.

<b>Table 3 - IC/UC 202 Incident Objectives - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Objective(s) (in priority order)	In priority order, enter clear and concise statements of the objectives for managing the incident. These objectives are for the response for the operational period as well as for the duration of the incident. Include alternative and/or specific tactical objectives if applicable.
4	Operational Period Command Emphasis	Enter command emphasis for the operational period which may include a general safety message and may list operational and/or tactical priorities. Command emphasis may be a sequence of events or order of events to address. This block is not a narrative, but a discussion about where to place emphasis if there are needs to prioritize based on direction from the Incident Commander or the Unified Commander. Examples could include to be aware of falling debris, secondary explosions, downed power lines, etc.
5	Site Safety Plan Required? Approved Site Safety Plan(s) Located At.	Check box as to whether or not a site safety plan is required for this incident. Enter where the approved Site Safety Plan(s) is located.

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<b>Table 3 - IC/UC 202 Incident Objectives - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
6	Incident Action Plan	Check the following forms which are included in this Incident Action Plan: IC/UC 203, IC/UC 204, IC/UC 205, IC/UC 206, IC/UC 209, IC/UC 210, IC/UC 211, IC/UC 214, IC/UC 218, IC/UC 219, Map/Chart, Weather Forecast/Tides/Currents, and/or Other Attachments
7	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.
8	Approved by Incident Commander	The Incident Commander approves the Incident Objectives. In cases of a Unified Command, one Incident Commander may approve the incident objectives. If additional Incident Commanders need to sign the Incident Objectives, attach blank pages.

### **C. IC/UC 203 – Organization Assignment List**

#### **1. Purpose**

The Organization Assignment List (IC/UC 203) form provides personnel with information on the units that are currently activated and the names of personnel staffing each position. The Organization Assignment List is used to complete the Incident Organization Chart (IC/UC 207) which is posted at Incident Command.

Not all positions need to be filled. Some blocks may contain more than one name. The size of the organization is dependent on the magnitude of the incident, and can be expanded or contracted as necessary.

#### **2. Preparation**

The Resources Unit prepares and maintains this list under the direction of the Planning Section Chief. Complete only the blocks for the positions which are being used for the incident. If a trainee is assigned to a position, indicate this with a “T” in parenthesis behind the name (e.g. A. Smith (T)).

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3. Distribution

The Organization Assignment List must be duplicated, attached to the Incident Objectives (IC/UC 202) form, and given to all supervisory personnel at the Section, Branch, Group, and Unit level as part of the Incident Action Plan (IAP). All completed original forms must be given to the Documentation Unit, Planning Section.

4. Notes

The Organization Assignment List serves as part of the IAP. More than one name can be listed in each block. If additional pages are needed, use a blank Organizational Assignment List and renumber pages.

**For all individuals, use at least the first initial and last name. If a shift change occurs during an operational period, list both names, separated by a slash.**

Intelligence and investigative functions can be listed in several different places within the Organization Assignment List.

**Table 4 - IC/UC 203 Organizational Assignment List - Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Incident Commander(s) and Command Staff	Enter the names of the Incident Commander(s) and Command Staff. Label Assistants to Command Staff (i.e. "Assistant Safety Officer"). For Unified Command, include agency names.
4	Agency/Organization Representatives	Enter the agency or organization and the names of their representatives.
5	Planning Section	Enter the name of the Planning Section Chief, Deputy, and Unit Leaders after each title. List Technical Specialists with the indication of specialty.
6	Logistics Section	Enter the name of the Logistics Section Chief, Deputy, and Unit Leaders after each title.

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**Table 4 - IC/UC 203 Organizational Assignment List - Block Instructions**

<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
7	Operations Section	Enter the name of the Operations Section Chief and Deputy, Branch Director(s) and Deputy, and Group Leaders for each title. For Groups, enter an identifier in the left column and the individuals name in the right column.
8	Finance/Administration Section	Enter the name of the Finance/Administration Section Chief and Deputy, and Unit Leaders after each title.
9	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.

### **D. IC/UC 204 – Assignment List**

1. Purpose

The Assignment List (IC/UC 204) form informs Group supervisors of incident assignments. Once the Command and General Staff agree to the assignments, the assignment list is given to the appropriate Group.

2. Preparation

The Assignment List is normally prepared by the Resources Unit Leader, Logistics Section using guidance from the Incident Objectives (IC/UC 202), Operational Planning Worksheet (IC/UC 215), and the Operations Section Chief. The Assignment List must be approved by the Incident Commander, but may be reviewed and initialed by the Planning Section Chief and Operations Section Chief as well.

3. Distribution

The Assignment List is duplicated and attached to the Incident Objectives (IC/UC 202) form. In some cases, assignments may be given via radio/telephone/fax/blackberry, or other communication device. All completed original forms must be given to the Documentation Unit, Planning Section.

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### 4. Notes

The Assignment List details assignments at Group levels and is part of the IAP. If additional pages are needed, use a blank Assignment List and renumber pages.

<b>Table 5 - IC/UC 204 Assignment List - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Assignment Identifier	The assignment identifier is for use in a large IAP for reference only. Write the alpha-numeric abbreviation for the branch, group, and staging area (e.g. "Branch 1", "Group 1A") in large letters for easy referencing.
4	Operations Personnel	Enter the name and contact numbers of the Operations Section Chief, applicable Branch Directors, and Group Leaders.
5	Resources Assigned	<p>Enter the following information about the resources assigned to the Group for the operational period.</p> <ul style="list-style-type: none"> <li>• Resource Identifier - A unique way to identify a resource (e.g., ENG-13, IASCC- 413). If the resource has been ordered but no identification has been assigned, use TBD (To Be Determined).</li> <li>• Leader - Enter resource leader's name.</li> <li>• # of Persons - Enter total number of persons for the resource assigned, including the leader.</li> <li>• Contact – List numbers for phone, blackberry, radio frequency, or any other communication devices. Enter primary means of contacting the leader or contact person (e.g., radio, phone, and blackberry). Be sure to include the area code when listing a phone number.</li> <li>• Reporting Remarks, Notes, and Other Information - Provide special notes or directions specific to the resource. If required, add notes to indicate status briefing, transportation, or other information.</li> </ul>

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<b>Table 5 - IC/UC 204 Assignment List - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
6	Work Assignments	Provide a statement of the tactical objectives to be achieved within the operational period by personnel assigned to the Group.
7	Special Instructions	Enter a statement noting any safety problems, specific precautions to be exercised, drop-off or pick-up points, or other important assignment information.
8	Communications (radio and/or phone contact numbers needed for this assignment)	Enter specific communications information, including emergency numbers, for the branch and group. If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (IC/UC 205) form. Phone and blackberry numbers should include the area code.
9	Emergency Communications	Enter any emergency messages disseminated.
10	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.

### **E. IC/UC 205 - Incident Radio Communications Plan**

#### **1. Purpose**

The Incident Radio Communications Plan (IC/UC 205) form provides information on all radio frequency or trunked radio system talk group assignments for each operational period. This plan is a summary of information obtained about available radio frequencies or talk groups and the assignments of those resources by the Communications Unit Leader, Logistics Section.

#### **2. Preparation**

The Incident Radio Communications Plan is prepared by the Communications Unit Leader and given to the Planning Section Chief for inclusion in the Incident Action Plan.

#### **3. Distribution**

The Incident Radio Communications Plan is duplicated and given to all recipients of the Incident Objectives (IC/UC 202) form, including the Incident Commander/Unified Commanders. Some information

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from the Incident Radio Communications Plan on frequency or talk group assignments is repeated on the Assignment List (IC/UC 204) form.

4. Notes

The Incident Radio Communications Plan (IC/UC 205) is used to provide, in one location, information on all radio frequency assignments down to the Group level for each operational period. The Incident Radio Communications Plan is part of the IAP. If additional pages are needed, use a blank Communications Plan and renumber pages.

**Table 6 - IC/UC 205 Incident Radio Communications Plan - Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident
2	Date/Time Prepared	Enter preparation date as (month/day/year) and time using the 24-hour clock.
3	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
4	Basic Radio Channel Use	<p>Enter the following information concerning radio channel use:</p> <ul style="list-style-type: none"> <li>• Zone Group.</li> <li>• Channel # - Enter the channel number assigned by the Communications Unit Leader and pursuant to Standard Operating Procedures.</li> <li>• Function - Enter the function of each talk group/channel (e.g. Command, Tactical, Ground-to-Air, Air-to-Air, Support, Dispatch, etc.).</li> <li>• Channel Name/Trunked Radio System Talk Group - Enter the designated name for the talk group/channel.</li> <li>• Assignment - Enter the IC/UC position to which this talk group/channel will be assigned.</li> <li>• RX Freq (Receive Frequency) - N or W - Enter the Receive Frequency (RX Freq) as a programmed mobile or portable subscriber. Use xxx.xxxx out to four decimal places followed by a "N" designating narrowband or a "W" designating wideband emissions. The name of the specific trunked radio system from which the talk group is associated may be entered across all fields on the IC/UC 205 form normally used for conventional channel programming information.</li> <li>• RX Tone/NAC - Enter the Receive Continuous Tone Coded Squelch System (CTCSS) sub audible tone (RX</li> </ul>

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**Table 6 - IC/UC 205 Incident Radio Communications Plan - Block Instructions**

Block Number	Block Title	Instruction
		<p>Tone) or Network Access Code (RX NAC) for the receiver frequency as a programmed mobile or portable subscriber.</p> <ul style="list-style-type: none"> <li>• TX Freq (Transmit Frequency) - N or W - Enter the Transmit Frequency (TX Freq) as a programmed mobile or portable subscriber. Use xxx.xxxx out to four decimal places followed by a “N” designating narrowband or a “W” designating wideband emissions.</li> <li>• TX Tone/NAC - Enter the Transmit Continuous Tone Coded Squelch System (CTCSS) sub audible tone (TX Tone) or Network Access Code (TX NAC) for the transmit frequency as a programmed mobile or portable subscriber.</li> <li>• Mode (A, D, or M) - Enter “A” for analog operation, “D” for digital operation or “M” for Mixed-mode operation.</li> <li>• Remarks – Enter remarks related to the function and assignment for each entry. Examples can be repeater location, patched channels talk group information, and assignment identifier as defined in the Assignment List (IC/UC 204) form.</li> </ul>
5	Special Instructions	Enter any special instructions for radio communications. Examples could be use of cross-band repeaters, secure-voice, encoders, and private line (PL) tones.
6	Prepared By (Communications Unit Leader)	Enter the name, IC/UC position, and signature of the person preparing the form, typically the Communications Unit Leader. Enter date as (month/day/year) and time using the 24-hour clock.

### F. IC/UC 205A – Communications List

#### 1. Purpose

The Communications List (IC/UC 205A) form records methods of contact for incident personnel. While the Incident Radio Communications Plan (IC/UC 205) form is used to provide information on all radio frequencies down to the group level, the Communications List records methods of contact for personnel assigned to the incident (radio frequencies, phone numbers, blackberry numbers, etc.). The Communications List can be thought of as an incident directory.

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2. Preparation

The Communications List (IC/UC 205A) can be filled out during incident check-in and is maintained and distributed by the Communications Unit leader. This form must be updated each operational period.

3. Distribution

The Communications List (IC/UC 205A) is distributed by the Communications Unit Leader, and posted as necessary. All completed original forms must be given to the Documentation Unit, Planning Section. **This form will contain sensitive information and should be handled accordingly.**

4. Notes

The Communications List (IC/UC 205A) is an optional part of the IAP. This option is exercised in conjunction with the Incident Radio Communications Plan (IC/UC 205) form. If additional pages are needed, use a blank Communications List and renumber pages.

**Table 7 - IC/UC 205A Communications List - Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Basic Local Communications Information	Enter the communications methods assigned and used for personnel by their assigned IC/UC position. <ul style="list-style-type: none"> <li>• Section/Group - Enter the appropriate IC/UC section/group or indicate command staff.</li> <li>• Position Assigned - Enter the IC/UC organizational assignment.</li> <li>• Name - Enter the name of the assigned personnel.</li> <li>• Method(s) of Contact (radio frequency, phone, blackberry, cell, etc.) - For each personnel assignment, enter the relevant contact information. Include area code and vehicle identification, or incident identification number for motor vehicles being deployed (e.g. HAZMAT-1).</li> </ul>
4	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form, typically the Communications Unit Leader. Enter date as (month/day/year) and time using the 24-hour clock.

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### G. IC/UC 206 – Medical Plan

1. Purpose

The Medical Plan (IC/UC 206) form lists information regarding incident medical aid stations, medical transportation services, hospitals, and medical emergency procedures.

2. Preparation

The Medical Plan is prepared by the Medical Unit Leader, Logistics Section and reviewed by the Safety Officer to ensure IC/UC coordination. If aviation assets are utilized for rescue, coordination must occur with the Air Operations Branch, Operations Section.

3. Distribution

The Medical Plan may be attached to the Incident Objectives (IC/UC 202) form, or information from the Medical Plan pertaining to medical aid stations and medical emergency procedures may be noted on the Assignment List (IC/UC 204) form. All completed original forms must be given to the Documentation Unit, Planning Section.

4. Notes

The Medical Plan serves as part of the Incident Action Plan (IAP). If additional pages are needed, use a blank Medical Plan and renumber pages.

<b>Table 8 - IC/UC 206 Medical Plan - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Medical Aid Stations	Enter the following information regarding the medical aid stations: <ul style="list-style-type: none"> <li>• Name - Enter name of the medical aid station.</li> <li>• Location - Enter the location of the medical aid station (i.e., Staging Area location, Camp Ground location, etc.).</li> <li>• Phone Number - Enter the phone number for the medical aid station(s).</li> <li>• Paramedics on Site - Indicate Yes or No if paramedics are at the site indicated.</li> </ul>

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<b>Table 8 - IC/UC 206 Medical Plan - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
4	Transportation (indicate air or ground)	<p>Enter the following information regarding ambulance transportation services:</p> <ul style="list-style-type: none"> <li>• Ambulance Service - Enter name of ambulance service.</li> <li>• Location - Enter the location of the ambulance service.</li> <li>• Phone Number - Enter the phone number for the ambulance service.</li> <li>• Level of Service - Indicate the level of service available for each ambulance, either ALS for Advanced Life Support or BLS for Basic Life Support.</li> </ul>
5	Hospitals	<p>Enter the following information regarding hospitals:</p> <ul style="list-style-type: none"> <li>• Hospital Name - Enter hospital name.</li> <li>• Address and Latitude/Longitude (helipad) - Enter the physical address of the hospital, and the latitude and longitude if the hospital has a helipad.</li> <li>• Phone Number(s)/Frequency - Enter the phone number(s) and/or communication frequency for air support.</li> <li>• Travel Time - Air and Ground - Enter the travel time by air and ground from the incident site to the hospital.</li> <li>• Trauma Center - Indicate Yes or No if the hospital has a trauma center.</li> <li>• Burn Center - Indicate Yes or No if the hospital has a burn center.</li> <li>• Helipad - Indicate Yes or No if the hospital has a helipad.</li> </ul>
6	Special Medical Emergency Procedures	<p>Note any special emergency instructions for use by incident personnel. This could include (1) who should be contacted, (2) how they should be contacted; and (3) who manages cascading events during an incident due to a rescue, accident, etc. Include procedures for reporting medical emergencies.</p> <p>A check box is provided if aviation assets are utilized for rescue. If aviation assets are used, coordinate with Air Operations Branch, Operations Section</p>
7	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.
8	Approved By (Med. Unit Leader)	Enter the name and signature of the Medical Unit Leader, Logistics Section person that has prepared this form. Enter date as (month/day/year) and time using the 24-hour clock.

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### H. IC/UC 207 – Incident Organization Chart

1. Purpose

The Incident Organization Chart (IC/UC 207) form is a wall chart depicting the IC/UC organization position assignments for the incident. The Incident Organization Chart indicates what IC/UC organizational elements are activated and the corresponding names of personnel.

The organization chart is scalable and flexible depending on the magnitude and type of incident. Personnel are to be listed in each box according to the IC/UC position.

2. Preparation

The Incident Organization Chart is prepared by the Operations Section Chief and is reviewed by the Incident Commander. Only complete the blocks for positions that are activated. If needed, add additional blocks for Branch Directors, Group Leaders, Units Leaders, and Emergency Support Functions. For detailed information about positions, consult the NIMS ICS Field Operations Guide.

The Incident Organizational Chart is intended to be used as a wall size display for better visibility. A new chart is completed for each operational period, and updated when organization changes occur.

3. Distribution

The Incident Organization Chart is intended to be wall mounted at an Emergency Operations Center and at other Incident Commands; and is not intended to be part of the Incident Action Plan (IAP). The completed Chart must be archived with the Documentation Unit, Planning Section.

4. Notes

The Incident Organization Chart has been developed as 8½ x 14 (legal size) and as 11 x 17 sizes for document reproduction.

The Intelligence/Investigative Functions can be embedded in several different places within the organizational chart. If additional pages are needed, use a blank Incident Organization Chart and renumber pages.

**Table 9 - IC/UC 207 Incident Organization Chart - Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident

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<b>Table 9 - IC/UC 207 Incident Organization Chart - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Organization Chart	Complete the incident organization chart: <ul style="list-style-type: none"> <li>• For all individuals. Use at least the first initial and last name.</li> <li>• List agency if unified command exists.</li> <li>• If there is a shift change during an operational period, list both names, separated by a slash.</li> </ul>
4	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form, typically the Operations Section Chief. Enter date as (month/day/year) and time using the 24-hour clock.

### I. IC/UC 208 – Safety Message/Plan

#### 1. Purpose

The Safety Message/Plan (IC/UC 208) form is intended to expand upon the Site Safety Plan (IC/UC 202 form) and provide details necessary to safely plan for incident response.

#### 2. Preparation

The Safety Message/Plan is an optional form that must be completed by the Safety Officer or other qualified Command Staff personnel as part of the Incident Action Plan (IAP).

#### 3. Distribution

The Safety Message/Plan, if developed, will be reproduced with the IAP and given to all supervisory personnel at the Section, Branch, Group, and Unit levels. All completed original forms must be given to the Documentation Unit, Planning Section.

#### 4. Notes:

The Safety Message/Plan may serve as part of the IAP. If additional pages are needed, use a blank Safety Message/Plan and renumber pages.

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<b>Table 10 - IC/UC 208 Safety Message/Plan - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Safety Hazards and Precautions	Enter clear and concise statements for safety message priorities, and key command directives. Enter information such as known safety hazards and specific precautions to be observed during the operational period. If needed, additional safety messages should be referenced and attached.
4	Site Safety Plan Required? Approved Site Safety Plan(s) Located At	Check whether or not a site safety plan is required for the incident. Enter where the approved Site Safety Plan(s) are located.
5	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form, typically the Safety Officer. Enter date as (month/day/year) and time using the 24-hour clock.

### J. IC/UC 209 – Incident Status Summary

#### 1. Purpose

The Incident Status Summary (IC/UC 209) form is designed to collect decision information at the incident level to help support response at the management level. The Incident Status Summary will be the primary mechanism for reporting decision information from the incident level to incident coordination and support, including agency and/or organizational managers and executives.

The managers and executives may include the agency/organization having jurisdiction, but also may include elements and parties of a Multi-Agency Coordinating System (MACS). Examples of MACS elements or parties may be cooperating and assisting agencies/organizations, dispatch centers, emergency operations centers, administrators, elected officials, and county agencies.

Once the Incident Status Summary has been submitted, decision-makers at all incident support and coordination points may transmit and share the information, with sensitivity and appropriateness in mind, for use at local and regional levels.

## IC/UC Instructions for Reporting Forms – State of Indiana

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Accurate and rapid completion of the Incident Status Summary is needed to facilitate response and identify resource needs, determine the allocation of limited resources, and to secure additional capability due to limited resources with the constraints of time, distance, or other factors.

The Incident Status Summary is intended for reporting information on significant incidents, and not supplying summaries for every incident. Most incidents are of short duration and do not require limited resources and/or significant mutual-aid.

The Incident Status Summary provides a snap-shot of the incident, and therefore is an effective means to aid decision support. At the time of preparation, the Summary should contain the most accurate and updated information available. Instances will occur when responders may have access to more accurate and/or updated information to reference.

Coordination utilizing communications and information management systems within IC/UC and MACS should have procedures in place that designate authoritative sources to provide updated and/or real-time information when the Incident Status Summary becomes outdated in a quickly evolving incident.

### 2. Reporting Requirements

The Incident Status Summary is to be used when an incident reaches a significant threshold to require additional information to effectively manage an incident. The minimum threshold for use of this form is an incident that has spanned operational periods.

### 3. Preparation

The Planning Chief will prepare the Incident Status Summary when an incident management teams, or other teams deployed. When a team is not deployed, the Planning Chief will determine whether the Situation Unit Leader will prepare the Incident Status summary.

The Incident Status Summary is designed for incidents which impact specific geographic areas or emergencies that involve many jurisdictions and IC/UC organizations.

Every reasonable attempt must be made to complete the Incident Status Summary using adopted protocols with the best possible, currently available, and verifiable information at the time it is completed.

Web or internet references can be helpful to determine geographic location. For example, the Indiana Geographic Information Council (IGIC) uses UTM coordinates for its map viewer.

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Not every block devoted to geographic location needs to be completed. The determining factor is whether recipients of the Incident Status Summary can quickly decipher a geographic location.

If electronic data is submitted, do not attach or send large data files. Geospatial data would be the most common file type, and if this type must be included, the file should consist of few spatial geometries. Electronic data file sizes must be small enough to be transmitted through dial-up connections or other limited communications capabilities.

4. Distribution

The Incident Status Summary will be distributed to all supervisory personnel at the Section and Branch levels. All completed original forms must be given to the Documentation Unit, Planning Section.

5. Notes.

A limited number of blocks in the Incident Status Summary form are typically required. Responders are defined as personnel who are assigned or deployed to an incident.

Only pages 1 to 3 are numbered for two reasons. 1) Possible submission of additional pages in the Remarks section (Block 47), and 2) Possible submission of additional copies of the fourth page to provide a more detailed resource summary.

**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident
2	Incident Number	Enter the appropriate number based on standard operating procedures.
3	Report Version	<p>Check one box. The following guidelines will describe which box is appropriate:</p> <p>If only one Incident Status Summary will be submitted, check both "Initial" and "Final", or check only "Final".</p> <p>Check "Initial" if this is the first Incident Status Summary for this incident.</p> <p>Check "Update" if this is a subsequent summary for the same incident. The update can be submitted at various time intervals (see "Reporting Requirements" above).</p> <p>Check "Final" if this is the last Incident Status Summary to be submitted. Incidents may also be marked as "Final" if they become part of a new Complex (when this occurs, it</p>

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**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
		can be indicated in Remarks, Block 46). Enter a Rpt # - Enter a report number based on standard operating procedures.
4	Incident Commander(s) and Agency or Organization	Enter both the first and last name of the Incident Commander. If the incident is in a Unified Command, list all Incident Commanders by first initial, last name, and organization separated by a comma.
5	Incident Management Team	If applicable, indicate the incident management team for the incident. Follow established protocols for naming convention. This block should not be completed unless a deployed team is assigned to the incident.
6	Incident Start Date/Time	Enter incident start date as (month/day/year) and time using the 24-hour clock. Enter the Time Zone of the incident in three-letter all caps format (e.g.: EDT, PST).
7	Current Incident Size or Area	Enter the incident size or area. A figure most commonly written is acres or square miles, number of buildings, population numbers, and/or local government boundaries. Separate figures by incident type if appropriate. Indicate if size or area is an estimate.
8	Percent (%) Contained or Completed	Enter the percent that this incident is completed or contained (e.g. 50%). Meeting incident objectives may be a standard of measure.
9	Incident Definition	Enter a definition of the incident. Examples include categories of emergencies or disasters such as “tornado”, “wildfire”, “bridge collapse”, “civil unrest”, “parade”, “vehicle fire”, “mass casualty”, etc.
10	Incident Type, Severity, or Complexity Level	Write incident type as determined by Incident Commander(s) and Command Staff. Examples can be Level 4 – Limited Emergency Conditions, Level 3 – Active Emergency Conditions, Level 2 – Significant Emergency Conditions, and Level 1 – Full Emergency Conditions.
11	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
12	Prepared By	Enter the name, IC/UC position, and date/time of the person preparing the Incident Status Summary, typically the Planning Section Chief. Enter date as (month/day/year) and time using the 24-hour clock.
13	Date/Time	Enter submitted date as (month/day/year) and time using

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**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
	Submitted	the 24-hour clock. Enter the Time Zone in three-letter all caps format (e.g.: EDT, PST).
14	Approved By	Enter the name, IC/UC position, and signature of the person approving the Incident Status Summary, typically the Incident Commander.
15	Location Sent To	Enter the location the Incident Status Summary was sent to outside of the incident/unified command. This location may be a dispatch center, staging area, and/or emergency operations center. The Incident Commander who has approved this form by signing their name in Block 14 must complete Block 15.
16	State	Enter the state where the incident originated. If other states are involved, list them in Block 25.
17	County	Enter the county where the incident originated. If other counties are involved, list them in Block 25.
18	City/Town	Enter the city where the incident originated. If other cities are involved, list them in Block 25.
19	Unit or Other	If applicable, enter the unit or other information about where the incident originated. Examples are local identifiers that indicate primary incident jurisdiction or responsibility (i.e., Jackson PD, Unity FD, Marion Public Works, etc.)
20	Incident Jurisdiction	Enter the jurisdiction where the incident originated. Examples are general entries such as federal, state, or city.
21	Incident Location Ownership	If different than incident jurisdiction. Enter name of owner in the area where the incident originated. Examples are situations where jurisdictions contract for emergency services or the private ownership of land (e.g. McGurley Farms).
22	Latitude and Longitude	Enter the latitude and longitude where the incident originated. Latitude and longitude is to be entered if readily available and indicate format. For example, if degrees, minutes, and seconds are used; label as “33 degrees, 45 minutes, 01 seconds”.
23	U.S. National Grid Reference	Enter the U.S. National Grid (USNG) reference where the incident originated. The USNG is to be entered if readily available. The USNG is a world-wide plane coordinate system that supplements latitude and longitude by locating precise position referencing through GPS across jurisdiction boundaries. For example, a world-wide value

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**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
		can be entered as: 18S UJ 2337 0651.
24	Legal Description	Enter the legal description where the incident originated. The legal description is to be entered if readily available. For example, the legal description can be entered as the Northeast Quarter of the Southeast Quarter of Section 6, Township 4 South, Range 69 West, County of Jefferson, State of Indiana.
25	Short Location or Area Description	List all affected areas or a reference point as a general location or general reference point for the incident. For example, entries can include the “the southern third of Indiana” or “within a 5 mile radius of Gary, IN”. This information is important for incident support without a geographic map for reference. Other states, counties, and cities/towns not listed in blocks 16-18 will be listed here.
26	UTM Coordinates	Enter the Universal Traverse Mercator (UTM) coordinates where the incident originated. The UTM is to be entered if readily available from the authority. The UTM is a world-wide plane coordinate system that projects the round earth on a flat map. For example, a coordinate can be entered as world-wide value (meters) as north 4479843.497 and east 570995.113 (Kokomo, IN).
27	Note any electronic geospatial data included or attached	Note any electronic geospatial data attached (indicate metadata, and how data is attached. Electronic data must consist of few spatial geometries and a file size small enough to be transmitted through dial-up connections or other limited communications capabilities. Include a hyperlink or other access information if incident geospatial data is posted online or available via FTP (File Transfer Protocol).
28	Significant Events for the Time Period Reported	Report significant events in summary form for Blocks 30-35. This block is a single paragraph of overall incident status.
29	Materials or Hazards Involved	Enter hazardous materials such as chemicals, explosives, fuels, biological agents, radiation, or other hazards involved in the incident that are leaking, burning, infecting, or otherwise part of the incident. Hazards may include structural collapse, avalanche activity, criminal activity, etc.
30	Damage Assessment Information	Summarize threatened, damaged, and /or destroyed structures for residential, commercial, or industrial property. Include a short summary for the operational period and cumulatively since the start of the incident. . Include critical

## IC/UC Instructions for Reporting Forms – State of Indiana

**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
		<p>infrastructure and known cascading events.</p> <p>Refer to more detailed damage assessment forms if necessary. Complete table based on the following definitions. If not applicable, enter N/A. Note in table or in text block if numbers entered are estimates or are confirmed.</p> <p># Threatened (72 hrs) – Enter the number of structures potentially threatened by the incident within the next 72 hours.</p> <p># Damaged – Enter the number of structures damaged by the incident. Includes structures that are temporarily uninhabitable.</p> <p># Destroyed – Enter the number of structures destroyed beyond repair by the incident.</p> <p>Single Family Residences – Enter the number of threatened, damaged, and destroyed structures for single family dwellings/homes/units. Note any specifics in the text block if needed, such as type of residence (apartments, duplexes, single-family homes, etc.).</p> <p>Commercial and Industrial Property – Enter the number of threatened, damaged, and destroyed structures for commercial and industrial property.</p> <p>Accessory Structures – Enter the number of threatened, damaged, and destroyed structures that are <u>not</u> used as living quarters or the primary place of business. Accessory structures are often garages and/or storage buildings.</p> <p>Critical Infrastructure (CI) – Enter the number of threatened, damaged, and destroyed energy, transportation, and communication facilities affected by the incident. Reference CI material for other sectors.</p>
31	Public Status Summary	<p>This section summarizes incident information regarding person-related fatalities, injuries, illnesses, entrapments, evacuations, and immunizations for civilians (members of the public). Civilians are those members of the public who are affected by the incident and not part of the response.</p> <p>Caution must be used when reporting information in this section. Public status must be reported as accurately as possible due to its effect on response efforts. Only the authority having jurisdiction should confirm public status numbers.</p> <p>All information is considered sensitive and must be carefully coordinated with Command Staff to synchronize with public</p>

## IC/UC Instructions for Reporting Forms – State of Indiana

**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
		<p>information and investigative/intelligence efforts. The definition of reported items are provided below.</p> <p><b># for Operational Period</b> – Enter the total number of civilians impacted for the operational period.</p> <p><b># Total To Date</b> – Enter the total number of civilians impacted for the entire duration of the incident. This is a cumulative total number that must be reviewed each operational period.</p> <p><b>Fatalities</b> – Enter the number of confirmed civilian deaths that are a result of incident events. Verify appropriate notifications have been made prior to release of this information.</p> <p>Casualties are often confused with fatalities. Casualties are defined as a person <u>missing</u> through death, wounds, injury, sickness, internment, capture, or missing in action.</p> <p><b>Injuries/Illness</b> – Injuries or illnesses caused by a biological event such as an epidemic or injuries caused by exposure to toxic or radiological substances.</p> <p><b>Trapped or in Need of Rescue</b> – Enter the number who are trapped or in need of rescue.</p> <p><b>Missing</b> – Enter the number who are missing due to the incident. Note if estimated. Includes <b>casualties</b> (see definition under fatalities).</p> <p><b>Evacuated</b> – Enter the number who are evacuated due to the incident. Note if estimated.</p> <p><b>Sheltering-in-Place</b> – Enter the number who are sheltering in place due to the incident. Note if estimated.</p> <p><b>Temporary Shelters</b> – Enter the number who are in temporary shelters as a result of the incident. Note if estimated.</p> <p><b>Received Mass Immunizations?</b> – Enter the number who have received mass immunizations due to the incident. Do not estimate.</p> <p><b>Require Immunizations?</b> – Enter the number who require mass immunizations due to the incident. Note if estimated.</p> <p><b>Quarantined</b> – Enter the number who are in quarantine due to the incident. Do not estimate.</p> <p><b>Total Civilians Affected</b> – Enter sum of above columns.</p>
32	Responder Status Summary	<p>Similar to the public status summary, this section summarizes incident information regarding responder-related fatalities, injuries, illnesses, entrapments, and</p>

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**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
		<p>immunizations. Responders are those personnel included as part of command and organization/agency personnel assisting with response efforts.</p> <p>Caution must be used when reporting information in this section. Responder status must be reported as accurately as possible due to its effect on response efforts. Only the authority having jurisdiction should confirm responder status numbers.</p> <p>All information is considered sensitive and must be carefully coordinated with Command Staff to synchronize with public information and investigative/intelligence efforts. The definition of reported items are provided below.</p> <p><b># for Operational Period</b> – Enter the total number of responders impacted for the operational period.</p> <p><b># Total To Date</b> – Enter the total number of responders impacted for the entire duration of the incident. This is a cumulative total number that must be reviewed each operational period.</p> <p><b>Fatalities</b> – Enter the number of confirmed responder deaths that are a result of incident events. Verify appropriate notifications have been made prior to release of this information.</p> <p>Casualties are often confused with fatalities. Casualties are defined as a person <u>missing</u> through death, wounds, injury, sickness, internment, capture, or missing in action.</p> <p><b>Injuries/Illness</b> – Injuries or illnesses caused by a biological event such as an epidemic or an exposure to toxic or radiological substances. Injuries or illness include those in which the responder is unable to continue to perform in their incident assignment. The employer having jurisdiction may have additional guidelines on reporting requirements.</p> <p><b>Trapped or in Need of Rescue</b> – Enter the number who are trapped or in need of rescue.</p> <p><b>Missing</b> – Enter the number who are missing due to the incident. Note if estimated. Includes casualties (see definition under fatalities).</p> <p><b>Sheltering-in-Place</b> – Enter the number who are sheltering in place due to the incident. Note if estimated.</p> <p><b>Received Mass Immunizations?</b> – Enter the number who have received mass immunizations due to the incident. Do not estimate.</p>

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**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
		<p><b>Require Immunizations?</b> – Enter the number who require mass immunizations due to the incident. Note if estimated.</p> <p><b>Quarantined</b> – Enter the number who are in quarantine due to the incident. Do not estimate.</p> <p><b>Total Responders Affected</b> – Enter sum of above columns.</p>
33	Life, Safety, and Health Status/Threat Remarks	<p>Block 33 provides space for narrative text to elaborate on numbers compiled in Blocks 31, 32, and 34. Enter details regarding fatalities, injuries, illnesses, entrapments, evacuations, and immunizations.</p> <p>Reference Blocks 31, 32, and 34 for reporting procedures. Examples of text in this block may include references to primary responsibility and contacts for numbers provided in the status summaries and threat management. Remarks must be limited to information not found elsewhere in the IC/UC 209 form.</p>
34	Life, Safety, and Health Threat Management	<p>This section summarizes incident information regarding <u>management</u> of life, safety, and health threats for civilians (members of the public). Management is defined as current or future likelihood of threat, mass notifications, evacuation and sheltering plans, and possible mass immunization and quarantine efforts.</p> <p>Caution must be used when reporting information in this section. Threat management must be reported as accurately as possible due to its effect on response efforts. Only the authority having jurisdiction should confirm threat management numbers.</p> <p>All information is considered sensitive and must be carefully coordinated with Command Staff to synchronize with public information and investigative/intelligence efforts. The definition of reported items are provided below.</p> <p><b>Check If Active</b> – Check if life, safety, and health threat management activity is applicable.</p> <p><b>Notes</b> – Note source of information or geographic location.</p> <p><b>No Likely Threat</b> – No likely threat to life, safety, and health.</p> <p><b>Potential Future Threat</b> – Potential threat exists in the future to life, safety, and health.</p> <p><b>Mass Notifications In Progress</b> – Mass notifications are in progress regarding emergency situations, evacuations, sheltering, or other public safety advisories relating to the</p>

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**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
		<p>incident. An example is utilization of the Emergency Alert System (EAS) for notification.</p> <p><b>Mass Notifications Completed</b> – Indicate whether mass notifications have been completed.</p> <p><b>No Evacuations Imminent</b> – Evacuations are not anticipated in the near future.</p> <p><b>Planning For Evacuation</b> – Evacuation planning is underway.</p> <p><b>Planning For Shelter-In-Place</b> – Planning is underway for shelter-in-place operations.</p> <p><b>Evacuations In Progress</b> – Evacuations in progress related to the incident.</p> <p><b>Shelter-In-Place In Progress</b> – Shelter-in-place operations in progress.</p> <p><b>Repopulation In Progress</b> – Repopulation operations in progress.</p> <p><b>Mass Immunization In Progress</b> – A mass immunization is in progress relating to the incident.</p> <p><b>Mass Immunization Completed</b> – A mass immunization effort has been completed in relation to the incident.</p> <p><b>Quarantine In Progress</b> – A quarantine is in progress related to the incident.</p> <p><b>Area Restriction in Effect</b> – Note if there are area (geographic) restrictions in effect. Examples may be road closures or sheltering-in-place operations within local government boundaries.</p>
35	Weather Concerns	<p>Relevant to the incident, supply narrative of weather related concerns. Examples can be wind speed and direction, river/stream level, precipitation, temperature, watches/warnings, and/or other concerns. Include time frame for forecasted weather.</p>
36	Projected incident activity, movement, escalation, or spread and influencing factors for next operational periods	<p>Provide a narrative for projected incident related activities and influencing factors during the next operational period and 24, 48, and 72 hour time frames. If possible, also provide an estimate which the incident is expected to spread, migrate, or expand; or other factors that may cause activity changes. Discuss relevant activity and influencing factors that related to life safety and/or property preservation. If known, include an estimate of the area (geography) that will likely be affected.</p>

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**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
37	Strategic Objectives	Provide narrative for the end-state for the incident. Discuss the desired outcome for the incident based on current information and note strategic objectives, benefits, and planned events.
38	Current Incident Threat Summary and Risk Information for next operational periods	Summarize incident threats to life, property, community stability, residences, health care facilities, critical infrastructure, key resources, commercial facilities, natural and environmental resources, cultural resources, and government/business continuity of operations. Identify threats and risks for the next operational period and the 24, 48, 72, and 72+ time frames.
39	Critical Resource Needs to meet critical incident objectives for next operational periods	<p>List critical resource category, kind, and/or type using NIMS standards. Include amount of resource needed in priority order for the next operational period and the 24, 48, 72, and 72+ time frames.</p> <p>If critical resources are listed in this block, there should be corresponding orders listed on IC/UC Form 201, IC/UC Form 210, IC/UC Form 211, and IC/UC Form 215. Checking corresponding orders helps Command Staff plan for short term critical resources needs by defining time frame needed. Coordination with additional IC/UC forms assists Command Staff the ability to obtain critical regional or national resources through outside support mechanisms including multi-agency coordination systems and mutual aid agreements.</p> <p>Additional comments in Block 46 (Remarks) can help provide additional information to explain the critical resource needs.</p>
40	Strategic Discussion: Explain the overall strategy, constraints, and available information	<p>Provide narrative text to the identified critical resource needs in Block 39, the Incident Action Plan and management objectives, and the anticipated results. Explain major problems and concerns such as operational challenges, incident management problems, and social, political, economic, or environmental concerns or impacts. Block 43 completion is dependent on the Block 40 narrative.</p>
41	Planned actions for next operational period	Provide narrative that explains actions for the next operational period. Examples may include the transition in Incident Command, continuing to review engineering plans to remove a partially collapsed bridge, and map recovery operations and damaged assets.

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**Table 11 - IC/UC 209 Incident Status Summary - Block Instructions**

Block Number	Block Title	Instruction
42	Projected Final Incident Size/Area	Enter an estimate of the geographic area projected to be involved or affected over the entire length of the incident. Measurements may be area and/or population numbers. Use Blocks 16-27 for reference.
43	Anticipated Incident Management Completion Date	Enter the anticipated date in MM/DD/YYYY format. The date must reflect the day it is expected that incident objectives will be met, the day which the incident is contained or controlled, or the day which the incident is expected to be closed or resource support discontinued. Avoid leaving this block blank as this is important information for Command Staff.
44	Projected Significant Resource Demobilization Start Date	Enter the projected start date in MM/DD/YYYY format when significant resources are demobilized.
45	Estimated Incident Costs to Date	Enter the estimated incident costs to date based on current information. Incident costs include estimates for response efforts, including Command management and first responder activities. Do <u>not</u> include property damage assessment figures as they are impacts from the incident and not response costs. If costs decrease from one operational period to another, explain in Block 47 (Remarks).
46	Projected Final Incident Cost Estimate	Enter the projected final incident cost (estimated) to date based on current information. Projected incident cost include estimates for response efforts (Block 45) plus the potential incident daily cost using Block 43 for reference. Do not include property damage assessment figures as they are impacts from the incident and not response costs. If costs decrease from one operational period to another, explain in Block 47(Remarks).
47	Remarks	Use Block 47 to provide additional or other pertinent information that has been entered in previous blocks in IC/UC Form 209. Reference block number when providing information.  Additional or other pertinent information may include detailed weather information, specifics regarding fatalities or injuries, lengthy jurisdiction descriptions, threats to critical infrastructure or other resources, planned actions for next operational period, details on evacuation site locations

## IC/UC Instructions for Reporting Forms – State of Indiana

<b>Table 11 - IC/UC 209 Incident Status Summary - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
		and number evacuated, or details regarding incident cause. If applicable, list cascading events. Attach additional pages if necessary to include additional remarks in this block.
48	Agency or Organization	List the agencies or organizations contributing resources to the incident as responders, including mutual aid agreements. Agencies or organizations may be listed as single entities or in groups. When grouped together, individual agencies or organizations may be listed in Block 53.
49	Resources	Summarize resources by category, kind, and/or type using standard NIMS definitions. Indicate number of resources on top ½ of box and number of personnel on bottom ½ of box.  Pay particular attention to Block 48 and the listing of agencies and organizations, and any groups identified. For large incidents, it may be helpful to group similar categories, kinds, and/or types of resources together.  Only list resources that have been assigned to the incident. Do not list resources that have been ordered but not yet arrived at destination. Attach additional pages if necessary to include additional resource summary information.
50	# of Personnel	Enter # of Personnel <u>not</u> assigned to a resource. This number includes additional individuals (or overhead) that are not assigned to a resource by an agency or organization.
51	Total Personnel	Enter the total number of personnel for each agency or organization. As a preparer, add number of personnel in Block 49 and the number of personnel not assigned to a resource in Block 50.
52	Total Resources	Enter the sum total of resources for each column heading in Blocks 49, 50, and 51. The number entered will <u>exclude</u> personnel totals.
53	Additional Assisting Organizations Not Listed Above	List all agencies/organizations that are not directly involved in the incident and are providing support. Examples can include ambulance services, food pantries, and utility companies. Do not include agencies or organizations listed and/or counted in Blocks 48 to 52, unless further explanations are warranted.

## IC/UC Instructions for Reporting Forms – State of Indiana

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### K. IC/UC 210 - Status Change

1. Purpose

The Status Change (IC/UC 210) form is used by the Resource Unit Leader, Logistics Section to record status change information on resources assigned to the incident. The Status Change form can be transmitted with the General Message (IC/UC 213) form and can be a resource tracking reference for the Operations Section.

2. Preparation

The Status Change form is prepared by the Resource Unit Leader, Logistics Section from information received by radio, telephone, or any other communication device. Status information will be updated from numerous locations and personnel during an incident. A second copy is retained by the Communications Unit Leader, Logistics Section.

3. Distribution

The Status Change form is distributed by the Resource Unit Leader, and posted as necessary. All completed original forms must be given to the Documentation Unit, Planning Section. This form will contain sensitive information and should be designated accordingly.

4. Notes

The Status Change form can be used to update the Resource Status Cards (IC/UC 219) form to assist with incident-level resource management. If additional pages are needed, use a blank Status Change form and renumber pages.

**Table 12 - IC/UC 210 Status Change - Block Instructions**

<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Resource Number	Enter the approved identification (ID) number for the resource.

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<b>Table 12 - IC/UC 210 Status Change - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
4	New Status	<p>Indicate the current status of the resource: Appropriate status language consists of the following:</p> <ul style="list-style-type: none"> <li>• Available/Staged – Resources must be available for immediate deployment.</li> <li>• Assigned – Resources that have been tasked for incident assignment.</li> <li>• Out of Service – Resources not available due to poor condition or in need of repair. If repairable, estimate time of return (ETR) and indicate reason resource is out of service. Use Block 8 (Comments) if additional space needed.</li> </ul>
5	From (Location and Status)	Indicate the current specific location of the resource and status using the appropriate language (Block 4).
6	To (Location and Status)	Indicate the assigned specific location of the resource and status using the appropriate language (Block 4).
7	Location and Status Change Time and Date	Enter the start date (month/day/year) and time (using the 24-hour clock) for the location and status change.
8	Comments	Enter additional information from Blocks 4 to 7.
9	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form, typically the Resource Unit Leader. Enter date as (month/day/year) and time using the 24-hour clock.

### **L. IC/UC 211 – Incident Check-In List**

#### **1. Purpose**

The Incident Check-In List (IC/UC 211) form tracks personnel and equipment arriving at various incident locations. The Incident Check-In List serves as a record of location; and a specific check-in list for personnel and equipment. Critical information listed includes but is not limited to arrival date/time, leader's name, contact information, home base, mode of travel, and assignment.

#### **2. Preparation**

The Check-In List form may be completed by the leader of agency personnel and/or equipment upon arrival, or the Logistics Chief/Resource Unit Leader. Coordination with Incident Command is a requirement.

## IC/UC Instructions for Reporting Forms – State of Indiana

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3. Distribution

The Check-In List form is maintained by the Logistics Chief and distributed to the Operations Chief for demobilization.

4. Notes

The Check-In List is also available in 8½ x 14 (legal size) or 11 x 17 (tabloid) paper sizes. If additional pages are needed, use a blank Check-In List and renumber pages. Fields can be left blank if not necessary.

**Table 13 - IC/UC 211 Incident Check-In List - Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident
2	Incident Number	Enter the approved number assigned to the incident.
3	Check-In Location	Check appropriate box(es) and enter the check-in location. At a minimum, enter location as nearest identifiable landmark, village, town, or city. Note: ICP = Incident Command Post.
4	Start Date/Time	Enter the date (month/day/year) and time (using the 24-hour clock) that the form was started.
5	List Personnel/Resources	List personnel by agency name or discipline and resource by category, kind, and/or type using standard NIMS definitions. A State two-letter designation should be entered if part of an EMAC.
6	Order Request #	The order request number will be assigned by the agency dispatching the personnel or resources. Use existing protocol as appropriate for jurisdiction and/or discipline since several incident numbers may be used for the same incident.
7	Date/Time Check-In	Enter check-in date (month/day/year) and time (using 24-hour clock) for personnel and/or resource.
8	Leader's Name	Enter leader's (commander's) name, or for equipment, enter the operator.

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**Table 13 - IC/UC 211 Incident Check-In List - Block Instructions**

Block Number	Block Title	Instruction
9	Total Number of Personnel	Enter total number of personnel, including the leader.
10	Incident Contact Information	Enter contact information. Examples can be radio call sign or frequency, blackberry/cell number, and office number. Include name of contact, even if a leader.
11	Home Base	Enter the location at which the personnel or resource is based. At a minimum, enter location as nearest identifiable landmark, village, town, or city.
12	Departure Point	Enter the destination of the personnel or resource. At a minimum, enter location as nearest identifiable landmark, village, town, or city.
13	Mode of Travel	Enter the mode of travel enroute to destination. Examples may be bus, truck, helicopter, passenger vehicle, etc. Using standard NIMS definitions is preferable.
14	Incident Assignment	Enter the incident assignment at time of dispatch. Use common terms with no jargon or code.
15	Other Qualifications	Enter additional duties personnel is qualified to perform using IC/UC position titles.
16	Data Provided to Resource Unit	Enter the individual's name, date (month/day/year) and time (using 24-hour clock) that the corresponding entry was sent to the Resources Unit, Logistics Section.
17	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form, typically the Resource Unit Leader. Enter date as (month/day/year) and time using the 24-hour clock.

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### M. IC/UC 213 – General Message

1. Purpose

The General Message (IC/UC 213) form is used by incident dispatchers to record incoming messages which cannot be orally transmitted to recipients. Commonly, these messages contain time-sensitive elements which must be hand-delivered. The General Message form is also used by Command and General Staff, and other incident response personnel to transmit a message.

2. Preparation

The General Message form is prepared by incident dispatchers and other incident response personnel.

3. Distribution

Upon completion, the General Message form is hand delivered to the intended recipient, recipient sends a reply to the sender, and then the message is filed as part of the incident record by the sender.

4. Notes:

The General Message form is a three-part form. The sender will complete Blocks 1 to 7, and send message for recipient to complete Block 8. The sender will complete Block 9 after receiving reply.

**Table 14 - IC/UC 213 General Message - Block Instructions**

<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident
2	Date/Time	Enter the date (month/day/year) and time (using the 24-hour clock) when the message was created.
3	To	Enter the name and IC/UC position of the message recipient. Name must consist of at least the first initial and last name. For Unified Command, include agency name.
4	From	Enter the name and IC/UC position of the message sender. Name must consist of at least the first initial and last name. For Unified Command, include agency name.
5	Subject	Enter the message subject.

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**Table 14 - IC/UC 213 General Message - Block Instructions**

<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
6	Message	Enter the message body. Use common terms and NIMS definitions.
7	Approved By	If appropriate, enter the name and IC/UC position of the person approving the message. Name must consist of at least the first initial and last name. For Unified Command, include agency name.
8	Reply	Enter the message reply. Use common terms and NIMS definitions.
9	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.

### **N. IC/UC 214 – Activity Log**

1. Purpose

The Activity Log (IC/UC 214) form records notable activities at any IC/UC level. Notable activities may include resource and equipment assignments and the deployment of incident teams. Activity Log information is referenced during preparation of the after-action report.

2. Preparation

The Activity Log is prepared by Unit Leaders, and is reviewed at the Section level. Incident personnel preparing the Log should document how notable activities are occurring and/or progressing.

3. Distribution

An original copy of the Activity Log is submitted to the Documentation Unit, Planning Section for compilation. Unit Leaders are recommended to retain a copy for their own records.

4. Notes

If additional space is needed to adequately list notable activities, use Page 2 of the Activity Log.

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<b>Table 15 - IC/UC 214 Activity Log – Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident.
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Name	Enter the name of the person completing the Activity Log. May or may not be the same individual who prepares form for Unit Leaders. Name must consist of at least the first initial and last name.
4	IC/UC Position	Enter the IC/UC position of the person completing the Activity Log. May or may not be the same position of person who prepares form for Unit Leaders.
5	Home Agency and Unit	Enter the home agency of the person completing the Activity Log. If applicable, enter a unit designation for jurisdiction or discipline.
6	Personnel Assigned	Enter the following information for assigned resources: <ul style="list-style-type: none"> <li>• Enter the name of assigned personnel. Name must consist of at least the first initial and last name. Include name of individual preparing the form if assigned.</li> <li>• Enter the IC/UC position of assigned personnel. Include IC/UC position of individual preparing the form if assigned.</li> <li>• Enter the home agency of assigned personnel. If applicable, enter a unit designation for jurisdiction or discipline.</li> </ul>
7	Activity Log	Enter the following information for the activity log: <ul style="list-style-type: none"> <li>• Enter the date (month/day/year) and time (using the 24-hour clock) for the activity.</li> <li>• Enter the <u>notable</u> activities. Examples may include task assignments, task completions, injuries, or difficulties encountered.</li> </ul>
8	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.

## IC/UC Instructions for Reporting Forms – State of Indiana

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### O. IC/UC 215 – Operational Planning Worksheet

1. Purpose

The Operational Planning Worksheet (IC/UC 215) form communicates the decisions of the Operations Section during an incident. Decisions consist of resource assignments and instructions, resource supplies and needs, and deployment instructions. The Operational Planning Worksheet is utilized by the Resources Unit, Logistics Section to complete the Assignment List (IC/UC 204) form and inform Group supervisors of incident assignments.

2. Preparation

The Operational Planning Worksheet form is completed by the Operations Section with involvement from the Logistics Section and the Safety Officer (Command Staff). The Operations Section may find it useful to populate resource and deployment blocks prior to incidents.

3. Distribution

The Operations Planning Worksheet form is distributed at the Section Chief's meeting prior the briefing for the next operational period.

4. Notes

The Operational Planning Worksheet is also available in 8½ x 14 (legal size) or 11 x 17 (tabloid) paper sizes; and can be scaled to print for wall-mounting. If additional pages are needed, use a blank Operational Planning Worksheet and renumber pages.

**Table 16 - IC/UC 215 Operational Planning Worksheet – Block Instructions**

<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident.
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Branch, Division/Group, or Unit	Enter the Branch, Division/Group, or Unit for the resource assignment. Use slashes to separate IC/UC levels.

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<b>Table 16 - IC/UC 215 Operational Planning Worksheet – Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
4	Resource Assignment and Special Instructions	Enter the specific resource assignment given to each branch, division/group, or unit and any special instructions.
5	Resources	<p>List resource category, kind, or type as a heading. Use common terms and NIMS definitions. Personnel should be listed as a heading and shared with the resource heading by a slash.</p> <ul style="list-style-type: none"> <li>• Req. (Required) – Enter the number of resources consistent with the heading needed to fulfill assignment.</li> <li>• Have - Enter the number of resources consistent with the heading available to perform assignment.</li> <li>• Need - Enter the number of resources needed by subtracting the number in the “Have” row from the number in the “Req.” row. Designate negative numbers in parenthesis.</li> </ul>
6	Overhead Positions	IC/UC positions not directly assigned to a previously identified resource. Examples may be Assistant Safety Officer, Technical Specialist, Fuel Supply Attendant, etc.).
7	Special Equipment and Supplies	List special equipment and supplies associated with the resource. Special equipment commonly used is for aviation support.
8	Reporting Location	Enter the specific reporting location where the resource is to be based, staged, used at an ICP, etc.
9	Requested Arrival Date/Time	Enter the requested arrival date (month/day/year) and time (using the 24-hour clock) which resources are expected to arrive at the reporting location.
10	Total Resources Required	Enter the total number of resources <u>required</u> by category, kind, or type. Personnel should be listed and shared with the resource heading by a slash. Use standard NIMS definitions.
11	Total Resources Have on Hand	Enter the total number of resources <u>on hand</u> by category, kind, or type. Personnel should be listed and shared with the resource heading by a slash. Use standard NIMS definitions.

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<b>Table 16 - IC/UC 215 Operational Planning Worksheet – Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
12	Total Resources Need To Order	Enter the total number of resources <u>needed</u> by category, kind, or type. Personnel should be listed and shared with the resource heading by a slash. Use standard NIMS definitions.
13	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.

### **P. IC/UC 215A – Incident Action Plan Safety Analysis**

#### **1. Purpose**

The Incident Action Plan Safety Analysis (IC/UC 215A) form aids the Safety Officer in completing operational risk assessments and mitigations. The Safety Officer's analysis helps to prioritize hazards, safety, and health issues; and develops appropriate controls to mitigate risk. The Incident Action Plan Safety Analysis helps with communicating safety issues between the Planning Section and the Operations Section.

#### **2. Preparation**

The Incident Action Plan Safety Analysis is typically prepared by the Operations Section Chief during the development of the Incident Action Plan (IAP). Working alongside the Operations Section, the Safety Officer reviews the safety analysis when tactical operations are under development.

The Safety Analysis is closely linked to the Operational Planning Worksheet (IC/UC 215) form to help identify personnel assignments involving risks. Appropriate mitigation can then be developed to safeguard responders during the briefing session.

#### **3. Distribution**

The Incident Action Plan Safety Analysis is distributed to the Resources Unit, Logistics Section to assist with tactical operations. An original copy is submitted to the Documentation Unit, Planning Section for reference.

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4. Notes:

The Incident Action Plan Safety Analysis is part of the IAP and can be printed for wall mounting. If additional pages are needed, use a blank page and renumber.

**Table 17 - IC/UC 215A Incident Action Plan Safety Analysis - Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident
2	Incident Number	Enter the approved number assigned to the incident.
3	Date/Time Prepared	Enter preparation date as (month/day/year) and time using the 24-hour clock.
4	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
5	Incident Area	Enter the area where personnel or resources will encounter risks in response to incident. Examples of area are to list a specific branch, division, group, etc.
6	Hazards/Risks	List the type of hazards and/or risks to be encountered by personnel or resources relevant to the work assignment.
7	Mitigations	List actions needing to be undertaken to mitigate hazards/risks. Examples may be providing personal protective equipment or partnering to form team of three individuals.
8	Prepared By	Typically the Operations Section Chief. Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.
9	Reviewed By	Typically the Safety Officer (Command Staff). Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.

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### Q. IC/UC 218 – Support Vehicle Equipment Inventory

1. Purpose

The Support Vehicle Equipment Inventory (IC/UC 218) form lists an inventory of all support vehicles assigned to the incident. The information is most useful to the Logistics Section for the tracking of the types and locations of support vehicles. The Resources Unit, Logistics Section uses support vehicle information to initiate and help sustain the personnel/resources assigned to the incident.

2. Preparation

The Support Vehicle Inventory form is prepared by the Resources Unit Leader, Logistics Section with information from ground support personnel.

3. Distribution

The Resources Unit Leader distributes the Support Vehicle Equipment Inventory to appropriate ground support personnel. Subsequent changes may be relayed back to the Resources Unit Leader.

4. Notes

The Support Vehicle Equipment Inventory is also available in 8½ x 14 (legal size) or 11 x 17 (tabloid) paper sizes. If additional pages are needed, use a blank Support Vehicle Equipment Inventory and renumber pages.

**Table 18 - IC/UC 218 Support Vehicle Equipment Inventory - Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident
2	Incident Number	Enter the approved number assigned to the incident.
3	Date/Time Prepared	Enter preparation date as (month/day/year) and time using the 24-hour clock.
4	Vehicle Class	Enter the specific vehicle class. Examples can be buses, trucks, generators, bulldozers, pickups, or sedans. Use a separate IC/UC 218 form for each vehicle class.

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<b>Table 18 - IC/UC 218 Support Vehicle Equipment Inventory - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
5	Vehicle and Equipment Information	Record vehicle or equipment information in Blocks 6-15.
6	Order Request Number	Enter the order request number assigned by the agency dispatching the equipment. Use existing protocol as appropriate for jurisdiction and/or discipline since several incident numbers may be used for the same incident. EMAC request number may apply.
7	Vehicle or Equipment ID	Enter the license plate number or vehicle identification number (VIN) of the vehicle or piece of equipment.
8	Vehicle or Equipment Category, Kind, or Type	Enter the vehicle or equipment category, kind, or type using NIMS standards. Often will further define the vehicle class entered in Block 4.
9	Vehicle or Equipment Manufacturer	Enter the vehicle or equipment manufacturer name.
10	Vehicle Features	Enter the capacity or size (specification) of the vehicle or equipment that is critical to incident response. Examples can be 30-person, 3/4-ton, or 50 KW. Also indicate vehicle features that are critical to incident response operations. Examples can be 4WD, towing capacity, number of axles, heavy duty tires, high clearance, or automatic vehicle locator.
11	Agency or Owner	Enter the name of the agency or owner of the vehicle or equipment.
12	Operator Name and/or Contact Person	Enter the operator name and/or contact person information. Enter all phone numbers and/or communication device call-signs.

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<b>Table 18 - IC/UC 218 Support Vehicle Equipment Inventory - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
13	Incident Assignment	Enter a brief description of the incident assignment, including geographic location. Include additional agency, discipline, or jurisdictional information. Enter the identification number assigned to the support vehicle or piece of equipment, if applicable. Include radio identifier such as “Decontamination Unit 2” or “Search and Rescue 1” if applicable.
14	Incident Start Date and Time	Enter the start date the support vehicle or equipment is assigned. Enter date as (month/day/year) and time using the 24-hour clock.
15	Incident Release Date and Time	Enter the date the support vehicle or equipment has ended the assignment. Enter date as (month/day/year) and time using the 24-hour clock.
16	Prepared By	Typically the Logistics Chief. Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.

### **R. IC/UC 219 – Resource Status Cards**

1. Purpose

Resource Status Cards (IC/UC 219) are used by the Resource Unit Leader, Logistics Section to record status of vehicles, air craft, equipment, and personnel. These cards provide a visual display of the status of resources assigned to the incident.

2. Preparation

Prepared by the Resource Unit Leader, Logistics Section, the information entered on the Resource Status Cards may be obtained from several sources including, but not limited to:

- a) IC/UC 201 – Incident Briefing
- b) IC/UC 210 – Status Change
- c) IC/UC 211 – Incident Check-In List

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- d) IC/UC 213 – General Message
- e) Agency-specific information

### 3. Distribution

Resource Status Cards are typically displayed in racks where they can be easily viewed, retrieved, and updated. The Resource Unit Leader, Logistics Section maintains the cards until demobilization, and then submits cards to the Documentation Unit, Planning Section to be archived.

### 4. Notes

There is the potential for eight status cards to be utilized during an incident. Each card is identified by a different color, format, and content depending on the resource's characteristics. The following cards are:

- a) IC/UC 219-1: Header Cards – Grey
- b) IC/UC 219-2: Crew Cards – Green
- c) IC/UC 219-3: Engine Cards – Pink
- d) IC/UC 219-4: Helicopter Cards – Blue
- e) IC/UC 219-5: Personnel Cards – White
- f) IC/UC 219-6: Fixed Wing Cards – Orange
- g) IC/UC 219-7: Heavy Equipment Cards – Yellow
- h) IC/UC 219-8: Misc. Equipment/Task Force Cards – Tan

The following acronyms are commonly utilized throughout the Resource Status Cards:

- a) AOV – Agency-Owned Vehicle.
- b) ETA – Estimated Time Of Arrival.
- c) ETR – Estimated Time Of Return.
- d) O/S Mech – Out-of-Service for Mechanical reasons.
- e) O/S Pers – Out-of-Service for Personnel reasons.
- f) O/S Rest – Out-of-service for Rest, recuperation and/or time-limitation policies.

## S. IC/UC 220 – Air Operations Summary

### 1. Purpose

The Air Operations Summary (IC/UC 220) form provides the Operations Section Chief with information pertaining to the operating personnel, radio frequency, type, and location of fixed-wing aircraft and helicopters.

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2. Preparation

The Air Operations Summary (IC/UC 220) is completed by the Operations Section Chief with assistance from air operations. A limited amount of air operations information is obtained from the Operational Planning Worksheet (IC/UC 215) form. The remainder is derived from air operations assigned to the incident. If aviation assets are referenced on the Medical Plan (IC/UC 206) form, coordinate with the Logistics Section and indicate on the IC/UC 206 form.

3. Distribution

The Resources Unit Leader, Operations Section checks the form for completeness after receiving critical information from air operations. After checked, the Air Operations Summary is distributed to the Operations Chief.

4. Notes

If additional pages are needed, use a blank Air Operations Summary and renumber pages.

**Table 19 - IC/UC 220 Air Operations Summary – Block Instructions**

Block Number	Block Title	Instruction
1	Incident Name	Enter the name assigned to the incident.
2	Operational Period	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period.
3	Sunrise: Sunset:	Enter the sunrise and sunset (using the 24-hour clock) for the start of the operational period. Use data provided by the U.S. Naval Observatory.
4	Remarks	Enter special instructions for air operations. Instructions may include safety notes, special equipment, hazards, and priorities.
5	Ready Alert Aircraft	Identify ready alert aircraft that will be used as a Medivac for assigned personnel and enter on the Medical Plan (IC/UC 206) form. Identify aircraft to be used for New Incidents within a geographic area or to respond to cascading events.
6	Temporary Flight Restriction Numbers	Enter the altitude and the center point (latitude and longitude) for temporary flight restrictions. These numbers are provided by the Federal Aviation Administration (FAA) or are the order request numbers for the Temporary Flight Restriction.

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**Table 19 - IC/UC 220 Air Operations Summary – Block Instructions**

Block Number	Block Title	Instruction
7	Personnel	Enter the name and contact number of air operations personnel. These names and contact numbers are the branch directors, supervisors, or leaders at the basis for operations. Enter all phone numbers and/or communication device call-signs.
8	Frequency	Enter the applicable air/air, air/ground, command, deck, take-off and landing, and other air operations radio frequencies to be used during the incident.
9	Fixed Wing	Using NIMS standards, enter the category/kind/type of fixed wing aircraft. Also enter make-model, FAA Number (FAA N#), and base of fixed wing aircraft assigned to the incident. List the Supervisor's tactical aircraft as well as other fixed wing aircraft that support response to the incident.
10	Helicopters	Enter the following information about helicopters assigned to the incident. <ul style="list-style-type: none"> <li>• FAA Number (FAA N#)</li> <li>• Category/Kind/Type using NIMS standards</li> <li>• Make/Model</li> <li>• Base Location</li> <li>• Available Time - Enter projected elapsed time using the 24-hour clock the helicopter is available.</li> <li>• Start Time - Enter start time using the 24-hour clock at moment helicopter becomes operational.</li> <li>• Remarks – Enter other information regarding helicopters that is critical to incident operations.</li> </ul>
11	Prepared By	Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.

## IC/UC Instructions for Reporting Forms – State of Indiana

**Table 19 - IC/UC 220 Air Operations Summary – Block Instructions**

Block Number	Block Title	Instruction
12	Task, Mission, and/or Assignment	<p>Enter the following information for air tactical, reconnaissance, personnel transport, search and rescue, and/or any other incident response aircraft operations.</p> <ul style="list-style-type: none"> <li>• Priority. Enter number in consultation with the Operations Chief.</li> <li>• Category/Kind/Type using NIMS standards.</li> <li>• Tasks, Mission, and/or Assignment. Enter brief and specific responsibilities for the incident response aircraft. Examples can be water or retardant drops, logistical support, reconnaissance of SW Indiana, or MEDIVAC 2 persons from Bloomington, IN. If applicable, enter additional radio frequency communications, name of personnel and/or cargo, and special instructions.</li> <li>• Start Time - Enter start time using the 24-hour clock at moment air craft becomes operational.</li> <li>• Fly From - Enter the location at which the air craft is based. If applicable, enter location as nearest identifiable landmark, village, town, or city.</li> <li>• Fly To - Enter the destination location for the air craft. If applicable, enter location as nearest identifiable landmark, village, town, or city.</li> </ul>

### **T. IC/UC 221 – Demobilization Check-Out**

1. Purpose

The Demobilization Check-Out (IC/UC 221) form is intended to track and release personnel and/or equipment once an incident-assigned mission or task has been completed.

2. Preparation

The Logistics Section completes the top portion of the Demobilization Check-Out. Depending on the assigned resource and/or personnel, the appropriate Section completes the body of form IC/UC 221 and signs the designated block.

3. Distribution

The Logistics Section distributes this form to the appropriate section depending on the personnel and/or resource. Completed Demobilization Check-Out forms are submitted to the Planning Section as part of the incident record.

## IC/UC Instructions for Reporting Forms – State of Indiana

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4. Notes

Assigned personnel and/or resources are not released from duty until the Demobilization Check-Out form is complete and appropriate signatures obtained. If additional pages are needed, use a blank form and renumber pages.

<b>Table 20 - IC/UC 221 Demobilization Check-Out - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
1	Incident Name	Enter the name assigned to the incident
2	Incident Number	Enter the approved number assigned to the incident.
3	Planned Release	Enter the planned release date and time of personnel and/or resource. Enter date as (month/day/year) and time using the 24-hour clock.
4	Resource or Personnel Released	Using NIMS standards, enter name of personnel and/or resource being released.
5	Order Request #	Enter the order request number assigned by the agency dispatching the personnel and/or resources. Use existing protocol for jurisdiction and/or discipline since several incident numbers may be used for the same incident. Order Request number also used on IC/UC 211 form.
6	Resource or Personnel	Enter information in the appropriate section(s) that have approved the demobilization of personnel or resource(s). Information entered by a branch/unit leader are remarks regarding the demobilization along with name and signature of leader. Remarks can include reason(s) for demobilization.
7	Remarks	Enter additional information pertaining to the demobilization or release of personnel and/or resources. Examples can be needed transportation and lodging, and required performance ratings by agency.

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**Table 20 - IC/UC 221 Demobilization Check-Out - Block Instructions**

Block Number	Block Title	Instruction
8	Travel Information	<p>Enter the following travel information pertinent to personnel and/or resource demobilization.</p> <ul style="list-style-type: none"> <li>• Est. Departure Date/Time – Enter date as (month/day/year) and time using the 24-hour clock.</li> <li>• Actual Release Date/Time – Enter date as (month/day/year) and time using the 24-hour clock.</li> <li>• Destination – Enter geographic location of destination for demobilized personnel/resource.</li> <li>• ETA (Est. Date/Time of Arrival) – Enter date as (month/day/year) and time using the 24-hour clock for personnel/resource to arrive at home or at base unit.</li> <li>• Room Overnight? – Enter whether lodging will be required prior to returning to home or base unit.</li> <li>• Mode of Travel – Enter mode of travel. Examples can be car, air craft, and water craft.</li> <li>• Manifest? – Enter whether or not the personnel and/resource has a manifest. Enter number if affirmative.</li> <li>• Contact Name and Number – Enter mobile contact information for leader of demobilized asset.</li> <li>• Area/Agency/District Notification – If appropriate, enter first initial and last name of the personnel/resource leader and the date (month/day/year) notified.</li> </ul>

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<b>Table 20 - IC/UC 221 Demobilization Check-Out - Block Instructions</b>		
<b>Block Number</b>	<b>Block Title</b>	<b>Instruction</b>
9	Reassignment	<p>Enter whether the personnel and/or resource has been reassigned to a new task or mission. Additional reassignment information is as follows:</p> <ul style="list-style-type: none"> <li>• Task/Mission Description – Enter brief and specific responsibilities for the incident response personnel and/or resource. If applicable, enter newly approved incident name and number.</li> <li>• Location – Enter the specific reporting location where the personnel/resource is to be based, staged, used in an ICP, etc. Use geographic identifiers.</li> <li>• Order Request # – Enter the order request number assigned by the agency dispatching the personnel and/or resources. Use existing protocol for jurisdiction and/or discipline since several incident numbers may be used for the same incident. Number also used on IC/UC 211 and IC/UC 220 form.</li> </ul>
10	Prepared By	Typically the Logistics Chief. Enter the name, IC/UC position, and signature of the person preparing the form. Enter date as (month/day/year) and time using the 24-hour clock.