|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. Incident Name** | | | **2. Operational Period (Date/Time)**  From:       To: | | | | **ASSIGNMENT LIST ATTACHMENT** | |
|  | **ICS 204a-CG** |
| **3. Branch** | | | | **4. Division/Group** | | | | |
| **5. Strike Team/Task Force/Resource (Identifier)** | | **6. Leader** | | | **7. Assignment Location** | | | |
| **8. Work Assignment Special Instructions, Special Equipment/Supplies Needed for Assignment, Special Environmental Considerations,** **Special Site Specific Safety Considerations** | | | | | | | | |
|  | | | | | | | | |
| **Approved Site Safety Plan Located at:** | | | | | | | | |
| **9. Other Attachments (as needed)**  **Map/Chart**       **Weather Forecast/Tides/Currents** | | | | | | | | |
| **10. Prepared by: Date/Time** | **11. Reviewed by (PSC): Date/Time** | | | | | **12. Reviewed by (OSC): Date/Time** | | |