

OBJECTIVES ICS 202	1. INCIDENT NAME	2. DATE PREPARED	3. TIME PREPARED
4. OPERATIONAL PERIOD (Date/Time)			
5. OVERALL INCIDENT OBJECTIVE:			
6. OBJECTIVES FOR THIS OPERATIONAL PERIOD:			
7. WEATHER FORECAST FOR OPERATIONAL PERIOD			
8. GENERAL/SAFETY MESSAGE			
9. ATTACHMENTS ( <input checked="" type="checkbox"/> IF ATTACHED)			
<input type="checkbox"/> ORGANIZATION LIST (ICS 203)		<input type="checkbox"/> MEDICAL PLAN (ICS 206)	<input type="checkbox"/>
<input type="checkbox"/> ASSIGNMENT LISTS (ICS 204)		<input type="checkbox"/> INCIDENT MAP	<input type="checkbox"/>
<input type="checkbox"/> COMMUNICATIONS PLAN (ICS 205)		<input type="checkbox"/> TRAFFIC PLAN	<input type="checkbox"/>
ICS 202 5-94	10. PREPARED BY (Planning Section Chief)		11. APPROVED BY (Incident Commander)

<b>INCIDENT OBJECTIVES</b>	1. INCIDENT NAME	2. DATE PREPARED	3. TIME PREPARED
	4. OPERATIONAL PERIOD (Date/Time)		
5. GENERAL CONTROL OBJECTIVES FOR THE INCIDENT (Include Alternatives)			
6. WEATHER FORECAST FOR OPERATIONAL PERIOD			
7. GENERAL/SAFETY MESSAGE			
8. ATTACHMENTS ( <input checked="" type="checkbox"/> IF ATTACHED)			
<input type="checkbox"/> ORGANIZATION LIST (ICS 203)	<input type="checkbox"/> MEDICAL PLAN (ICS 206)	<input type="checkbox"/> _____	
<input type="checkbox"/> DIVISION ASSIGNMENT LISTS (ICS 204)	<input type="checkbox"/> INCIDENT MAP	<input type="checkbox"/> _____	
<input type="checkbox"/> COMMUNICATIONS PLAN (ICS 205)	<input type="checkbox"/> TRAFFIC PLAN	<input type="checkbox"/> _____	
<b>ICS 202</b>	<b>3-80</b>	9. PREPARED BY (Planning Section Chief)	10. APPROVED BY (Incident Commander)

