



**FEDERAL EMERGENCY MANAGEMENT AGENCY**  
**Emergency Support Function-9 - Incident Support Team**  
**National Urban Search and Rescue Response System**

<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 (* IF ATTACHED) <input type="checkbox"/> ORGANIZATION LIST (ICS 203) <input type="checkbox"/> MEDICAL PLAN (ICS 206) <input type="checkbox"/> _____ <input type="checkbox"/> ASSIGNMENT LIST (ICS 204) <input type="checkbox"/> INCIDENT MAP <input type="checkbox"/> _____ <input type="checkbox"/> COMMUNICATION PLAN (ICS 205) <input type="checkbox"/> _____			
<b>ICS 202 3-80</b>	9. PREPARED BY (PLANNING SECTION CHIEF)	10. APPROVED BY (INCIDENT COMMANDER)	