



Incident Status Summary (ICS 209)

*1. INCIDENT NAME		2. INCIDENT NO.		
*3. REPORT VERSION (Check one box on left) Initial Update Final	*4. INCIDENT COMMANDER(S) & AGENCY OR ORGANIZATION	5. INCIDENT MANAGEMENT ORGANIZATION	*6. INCIDENT START DATE/ TIME Date	
			Time	
7. CURRENT INCIDENT SIZE OR AREA INVOLVED (Use unit label – e.g. "sq km", "city block")	8. PERCENT (%) CONTAINED	*9. INCIDENT DEFINITION	10. INCIDENT COMPLEXITY LEVEL	*11. FOR TIME PERIOD From Date/Time
	COMPLETED			To Date/Time

APPROVAL & ROUTING INFORMATION

*12. PREPARED BY Print Name Signature	ICS Position Date/Time Prepared	*13. DATE/TIME SUBMITTED
*14. APPROVED BY Print Name Signature	ICS Position Date/Time Prepared	*15. PRIMARY LOCATION, ORGANIZATION, OR AGENCY SENT TO

INCIDENT LOCATION INFORMATION

*16. PROVINCE/TERRITORY		*17. COUNTY, REGIONAL/RURAL MUNICIPALITY, REGIONAL/MUNICIPAL DISTRICT	*18. CITY
19. UNIT OR OTHER		*20. INCIDENT JURISDICTION	21. INCIDENT LOCATION OWNERSHIP (if different than jurisdiction)
22. LONGITUDE	LATITUDE	23. DATUM	24. LEGAL DESCRIPTION (township, section, range)
*25. SHORT LOCATION OR AREA DESCRIPTION (list all affected areas or a reference point)			*26. UTM COORDINATES
27. NOTE ANY ELECTRONIC GEOSPATIAL DATA INCLUDED OR ATTACHED (indicate data format, content, and collection time information and labels)			

INCIDENT SUMMARY

*28. SIGNIFICANT EVENTS FOR THE TIME PERIOD REPORTED (summarize significant progress made, evacuations, incident growth, etc.)				
29. PRIMARY MATERIALS OR HAZARDS INVOLVED (hazardous chemicals, fuel types, infectious agents, radiation, etc.)				
30. DAMAGE ASSESSMENT INFORMATION (summarize damage and/or restriction of use or availability to residential or commercial property, natural resources, critical infrastructure and key resources, etc.)	A. Structural Summary	B. # Threatened (72 hrs)	C. # Damaged	D. # Destroyed
	E. Single Residences			
	F. Nonresidential Commercial Property			
	Other Minor Structures			
Page 1 of 4 * Required when applicable	Other			



Incident Status Summary (ICS 209)

*1. INCIDENT NAME	2. INCIDENT NO.
-------------------	-----------------

ADDITIONAL INCIDENT DECISION SUPPORT INFORMATION

*31. PUBLIC STATUS SUMMARY	A. # This Reporting Period	B. Total # to Date	*32. RESPONDER STATUS SUMMARY	A. # This Reporting Period	B. Total # to Date
C. INDICATE NUMBER OF CIVILIANS (PUBLIC) BELOW			C. INDICATE NUMBER OF CIVILIANS (PUBLIC) BELOW		
D. Fatalities			D. Fatalities		
E. With Injuries/Illness			E. With Injuries/Illness		
F. Trapped/In Need of Rescue			F. Trapped/In Need of Rescue		
G. Missing (note if estimated)			G. Missing (note if estimated)		
H. Evacuated (note if estimated)			H. Evacuated (note if estimated)		
I. Sheltering in Place (note if estimated)			I. Sheltering in Place (note if estimated)		
J. In Temporary Shelters (note if estimated)			J. In Temporary Shelters (note if estimated)		
K. Have Received Mass Immunizations			K. Have Received Mass Immunizations		
L. Require Immunizations (note if estimated)			L. Require Immunizations (note if estimated)		
M. In Quarantine			M. In Quarantine		
N. Total # Civilians (Public) Affected			N. Total Responders Affected		
33. LIFE, SAFETY, AND HEALTH STATUS/THREAT REMARKS			*34. LIFE, SAFETY, AND HEALTH THREAT MGMT.		A. Check if Active
			A. No Likely Threat		
			B. Potential Future Threat		
			C. Mass Notifications in Progress		
			D. Mass Notifications Completed		
			E. No Evacuation(s) Imminent		
			F. Planning for Evacuation		
			G. Planning for Shelter-in-Place		
			H. Evacuation(s) in Progress		
			I. Shelter-in-Place in Progress		
			J. Repopulation in Progress		
			K. Mass Immunization in Progress		
			L. Mass Immunization Complete		
			M. Quarantine in Progress		
N. Area Restriction in Effect					
35. WEATHER CONCERNS (synopsis of current and predicted weather, discuss related factors that may cause concern)					
36. PROJECTED INCIDENT ACTIVITY, POTENTIAL, MOVEMENT, ESCALATION, OR SPREAD and influencing factors during the next operational period and in 12-, 24-, 48-, and 72-hour timeframes					
12 hours					
24 hours					
48 hours					
72 hours					
Anticipated after 72 hours					
37. OBJECTIVES (define planned end-state for incident)					



Incident Status Summary (ICS 209)

*1. INCIDENT NAME

2. INCIDENT NO.

ADDITIONAL INCIDENT DECISION SUPPORT INFORMATION (continued)

38. CURRENT INCIDENT THREAT SUMMARY AND RISK INFORMATION IN 12-, 24-, 48-, AND 72-HOUR TIMEFRAMES AND BEYOND

Summarize primary incident threats to life, property, communities and community stability, residences, health care facilities, other critical infrastructure and key resources, commercial facilities, natural and environmental resources, cultural resources, and continuity of operations and/or business. Identify corresponding incident-related potential economic or cascading impacts.

12 hours

24 hours

48 hours

72 hours

Anticipated after 72 hours

39. CRITICAL RESOURCE NEEDS in 12-, 24-, 48-, and 72-hour timeframes and beyond to meet critical incident objectives. List resource category, kind, and/or type, and amount needed, in priority order:

12 hours

24 hours

48 hours

72 hours

Anticipated after 72 hours

40. STRATEGIC DISCUSSION: EXPLAIN IN RELATION TO OVERALL STRATEGY, CONSTRAINTS, AND CURRENT AVAILABLE INFORMATION TO

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

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

41. PLANNED ACTIONS FOR NEXT OPERATIONAL PERIOD

42. PROJECTED FINAL INCIDENT SIZE/AREA (use unit label – e.g., “sq km”)

43. ANTICIPATED INCIDENT MANAGEMENT COMPLETION DATE

44. PROJECTED SIGNIFICANT RESOURCE DEMOBILIZATION START DATE

45. ESTIMATED INCIDENT COSTS TO DATE

46. PROJECTED FINAL INCIDENT COST ESTIMATE

47. REMARKS (or continuation of any blocks above – list block number in notation)



Incident Status Summary (ICS 209)

*1. INCIDENT NAME	2. INCIDENT NO.
-------------------	-----------------

INCIDENT RESOURCE COMMITMENT SUMMARY

48. AGENCY OR ORGANIZATION	49. RESOURCES <small>(summarize resources by category, kind, and/or type; show # of resources on top ½ of box, show # of personnel associated with resource on bottom ½ of box)</small>	50. ADDITIONAL PERSONNEL <small>not assigned to a resource</small>	51. TOTAL PERSONNEL <small>(includes those associated with resources – e.g., aircraft or engines – and individual overhead)</small>
52. TOTAL RESOURCES			

53. ADDITIONAL COOPERATING AND ASSISTING ORGANIZATIONS NOT LISTED ABOVE
