

ICS 204 Assignment List

Purpose. The Assignment List(s) (ICS 204) informs Division and Group supervisors of incident assignments. Once the Command and General Staffs agree to the assignments, the assignment information is given to the appropriate Divisions and Groups.

Preparation. The ICS 204 is normally prepared by the Resources Unit, using guidance from the Incident Objectives (ICS 202), Operational Planning Worksheet (ICS 215), and the Operations Section Chief. It must be approved by the Incident Commander, but when possible, be reviewed and initialed by the Planning Section Chief and Operations Section Chief as well.

Distribution. The ICS 204 is duplicated and attached to the ICS 202 and given to all recipients as part of the Incident Action Plan (IAP). In some cases, assignments may be communicated via radio/telephone/fax. All completed original forms must be given to the Documentation Unit.

Notes:

- The ICS 204 details assignments at Division and Group levels and is part of the IAP.
- Multiple pages/copies can be used if needed.
- If additional pages are needed, use a blank ICS 204 and repaginate as needed.

| Block Number | Block Title | Instructions |
|--------------|---|---|
| 1 | Branch | This block is for use in a large IAP for reference only. Write the number (roman numerals) or name of the Branch for this form. |
| 2 | Division/Group | Write the "Letter" (A, B, C,...) assigned to the division or the functional name of the Group. |
| 3 | Incident Name | Enter the name assigned to the incident. |
| 4 | Operational Period <ul style="list-style-type: none"> • Date and Time | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies. |
| 5 | Operations Personnel <ul style="list-style-type: none"> • Name, Contact Number(s) <ul style="list-style-type: none"> – Operations Section Chief – Branch Director – Division/Group Supervisor – Staging Area Manager | Enter the name and contact numbers of the Operations Section Chief, applicable Branch Director(s), and Division/Group Supervisor(s), Staging Area Manager |
| 6 | Resources Assigned to this Period | Enter the following information about the resources assigned to the Division or Group for this period: |
| | <ul style="list-style-type: none"> • Resource Identifier | The identifier is a unique way to identify a resource (e.g., ENG-13, IA-SCC-413). If the resource has been ordered but no identification has been received, use TBD (to be determined). |
| | <ul style="list-style-type: none"> • Leader | Enter resource leader's name. |
| | <ul style="list-style-type: none"> • # of Persons | Enter total number of persons for the resource assigned, including the leader. |
| | <ul style="list-style-type: none"> • Contact (e.g., phone, pager, radio frequency, etc.) | Enter primary means of contacting the leader or contact person (e.g., radio, phone, pager, etc.). Be sure to include the area code when listing a phone number. |
| | <ul style="list-style-type: none"> • Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information | Provide special notes or directions specific to this resource. If required, add notes to indicate: (1) specific location/time where the resource should report or be dropped off/picked up; (2) special equipment and supplies that will be used or needed; (3) whether or not the resource received briefings; (4) transportation needs; or (5) other information. |

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| 7 | Work Assignments | Provide a statement of the tactical objectives to be achieved within the operational period by personnel assigned to this Division or Group. |
| 8 | Special Instructions | Enter a statement noting any safety problems, specific precautions to be exercised, drop-off or pickup points, or other important information. |
| 9 | Division/Group Communications Summary (radio and/or phone contact numbers needed for this assignment) <ul style="list-style-type: none"> • Name/Function • Primary Contact: indicate cell, pager, or radio (frequency/system/channel) • Prepared by: Name of and signature of person preparing form. Approved by: Name of and signature of PSC approving the form. Date/Time form was approved | Enter specific communications information (including emergency numbers) for this Branch/Division/Group. If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (ICS 205). Cell phones, landlines, and pager numbers should include the area code and any satellite phone specifics. In light of potential IAP distribution, use sensitivity when including cell phone number. Add a secondary contact (phone number or radio) if needed. |