

1. Incident Name:		2. Operational Period: (Date / Time)		ASSIGNMENT LIST ATTACHMENT ICS 204A-EPA	
		From: To:			
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):					
<input type="checkbox"/> Map/Chart		<input type="checkbox"/> Weather Forecast		<input type="checkbox"/> _____	
<input type="checkbox"/> _____		<input type="checkbox"/> _____		<input type="checkbox"/> _____	
<input type="checkbox"/> _____		<input type="checkbox"/> _____		<input type="checkbox"/> _____	
10. Prepared by: (Date / Time)		11. Reviewed by: (PSC) (Date/Time)		12. Reviewed by: (OPS) (Date / Time)	
Name/Position:					
ASSIGNMENT LIST ATTACHMENT				ICS 204A-EPA (Rev 05/18)	