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**1. Incident Name**

**2. Operational Period (Date/Time)**

From: To:

**ORGANIZATION ASSIGNMENT LIST**

**ICS 203**

**3. Incident Commander(s) and Staff**

Agency IC Deputy

**7. OPERATION SECTION**

Chief Deputy Deputy

Staging Area Manager Staging Area Manager Staging Area Manager

Safety Officer: Information Officer: Liaison Officer:

**a. Branch – Division Groups**

**4. Agency Representatives**

Branch Director

Deputy

Agency

Name

Division Group Division Group Division Group Division/Group Division/Group

**5. PLANNING/INTEL SECTION**

**b. Branch – Division/Groups**

Chief Deputy Resources Unit Situation Unit

Environmental Unit Documentation Unit Demobilization Unit Technical Specialists

Branch Director

Deputy

Division/Group Division/Group Division/Group Division/Group Division/Group

**c. Branch – Division/Groups**

Branch Director

Deputy

Division/Group Division/Group Division/Group Division/Group Division/Group

**6. LOGISTICS SECTION**

Chief Deputy

**a. Support Branch**

**d. Air Operations Branch**

Director Supply Unit Facilities Unit Vessel Support Unit Ground Support Unit

Air Operations Br. Dir Helicopter Coordinator

**8. FINANCE/ADMINISTRATION SECTION**

Chief Deputy Time Unit

Procurement Unit Compensation/Claims Unit

Cost Unit

**b. Service Branch**

Director Communications Unit

Medical Unit Food Unit

**9. Prepared By: (Resources Unit) Date/Time**



**ORGANIZATION ASSIGNMENT LIST (ICS-203)**

**Instructions for filling out the form**

**Purpose**. The Organization Assignment List provides ICS personnel with information on the units that are currently activated and the names of personnel staffing each position/unit. It is used to complete the Incident Organization Chart (ICS form 207) which is posted on the Incident Command Post display. An actual organization will be event-specific. **Not all positions need to be filled.** The size of the organization is dependent on the magnitude of the incident and can be expanded or contracted as necessary.

**Preparation**. The Resources Unit prepares and maintains this list under the direction of the Planning Section Chief.

The incident will drive the need for the Intelligence and Information function and where it is located in the ICS organization structure.

**Distribution**. The Organization Assignment List is duplicated and attached to the Incident Objectives form (ICS-

202) and given to all recipients of the Incident Action Plan. All completed original forms MUST be given to the Documentation Unit.

Item # 1.

2.

Item Title Incident Name

Operational Period

Instructions

Enter the name assigned to the incident.

Enter the time interval for which the form applies. Record the start and end date and time.

Enter the names of the Incident Commander and Staff. Use at least the first initial and last name.

Enter the agency names and the names of their representatives. Use at least the first initial and last name.

Enter the name of personnel staffing each of the listed positions. Use at least the first initial and last name. For Units, indicate Unit Leader and for Divisions/ Groups indicate Division/Group Supervisor. Use an additional page if more than three branches are activated. If there is a shift change during the specified operational period, list both names, separated by a slash.

Enter the name and position of the person completing the form Enter date (month, day, year) and time prepared (24-hour clock).

3.

Incident Commander and Staff

Agency Representative

4.

5.

thru 8.

Section

9.

Prepared By Date/Time

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