|  |  |  |
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| **1. Incident Name**      | **2. Operational Period (Date / Time)**From:       To:       | **ICS-220****AIR OPERATIONS SUMMARY** |
| **3. Distribution** [ ]  Fixed-Wing Bases       [ ]  Helibase        |
| **4. Personnel and Communications** | **5. Remarks (Spec. Instructions, Safety Notes,Hazards, Priorities)**      |
|  | Air Operations Director | Air / Air Frequency | Air / GroundFrequency |
| Air Operations Director |       |       |       |
| Air Tactical Supervisor |       |       |       |
| Air Support Supervisor |       |       |       |
| Helicopter Coordinator |       |       |       |
| Fixed-Wing Coordinator |       |       |       |
|  |       |       |       |
| **6.****Location / Function** | **7.****Assignment** | **8.****Fixed-Wing** | **9.****Helicopter** | **10.****Time** | **11.****Aircraft Assigned** | **12.****Operating Base** |
| NO. | TYPE | NO. | TYPE | Available | Commence |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|  | **13. TOTALS** |       |       |       |       |  |
| **14. Air Operation Support Equipment**      | **15. Prepared by Date / Time**             |