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| 1. **INCIDENT NAME**
 |       | 1. **OPERATIONAL PERIOD**
 |
| **DATE: FROM:**        **TO:**      **TIME: FROM:**        **TO:**       |
| 1. **NAME**
 |       | 1. **IMT POSITION**
 |       |
| 1. **ACTIVITY LOG**
 |
| **DATE/TIME** | **MAJOR EVENTS, DECISIONS MADE AND NOTIFICATIONS**  |
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| 1. **PREPARED BY**
 | **PRINT NAME:** |       | **SIGNATURE:** |       |  |
| **DATE/TIME:** |       | **FACILITY:** |       |  |
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**INSTRUCTIONS**

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| **PURPOSE:** | Records details of notable activities for any Incident Management Team (IMT) position. Provide basic documentation of incident activity, and a reference for any After Action Report (AAR). Personnel should document how relevant incident activities are occurring and progressing, actions taken and decisions made. |
| **ORIGINATION:** | All IMT staff |
| **COPIES TO:** | Planning Section Chief. Individuals may retain a copy for their own records. |
| **NOTES:** | Multiple pages can be used if needed. If additional pages are needed, use a blank NHICS 214 and repaginate as needed. Additions may be made to the form to meet the organization’s needs. |

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| **NUMBER** | **TITLE** | I**NSTRUCTIONS** |
| **1** | **Incident Name** | Enter the name assigned to the incident. |
| **2** | **Operational Period** | Enter the start date (m/d/y) and time (24-hour clock) and end date and time for the operational period to which the form applies. |
| **3** | **Name** | Print the name of the person for whom the activities are being documented. |
| **4** | **IMT Position** | Enter the Incident Management Team (IMT) position for which the activities are being documented. |
| **5** | **Activity Log** | Enter the time (24-hour clock) and briefly describe individual notable activities. Note the date (m/d/y), as well as if the operational period covers more than one day.Activities described may include notable occurrences or events such as task assignments, task completions, injuries, difficulties encountered, information received, etc.This block can also be used to track personal work activities by adding columns such as “Action Required,” “Delegated To,” “Status,” etc. |
| **6** | **Prepared by** | Enter the name and signature of the person preparing the form. Enter date (m/d/y), time prepared (24-hour clock), and facility. |