1. Incident Name	2. Operational Period (Date/Time) From: To:		ASSIGNMENT LIST ATTACHMENT	
3. Branch		4. Division/Group		
5. Strike Team/Task Force/Resource Identif	ier 6. L	eader	7. Ass	ignment Location
8. Work Assignment Special Instructions (if any) [OPS]				
9. Special Equipment/Supplies Needed for /	Assignment	(if any)		[OPS]
10. Special Environmental Considerations (if any)			[P.S.C.]
11. Special Site-Specific Safety Considerati	ons (if any)			[S.O.]
Approved Site Safety Plan Located at:				
		nup Assessment Team	Report	□ □
Weather Forecast Tic Tic Tic Tic Second	les			