

## INCIDENT STATUS SUMMARY

1. Date/Time		2. Initial <input type="checkbox"/> Update <input type="checkbox"/> Final <input type="checkbox"/>		3. Incident Name				4. Incident Number														
5. Incident Commander		6. Jurisdiction		7. County		8. Type Incident		9. Location		10. Started Date/Time												
11. Cause	12. Area Involved		13. % Controlled		14. Exptd Containment Date/Time		15. Exptd Contained Date/Time		16. Dec. Contained Date/Time													
17. Current Threat				18. Control Problems																		
19. Est. Loss	20. Ext Savings		21. Injuries		Deaths		22. Line Built		23. Line to Build													
24. Current Weather W Temp S W RH O			25. Predicted Weather W Temp S W RH O			26. Cost to Date			27. Est. Total Cost													
28. Agencies																						
29. Resources																				TOTALS		
Kind of Resource	SR	ST	SR	ST	SR	ST	SR	ST	SR	ST	SR	ST	SR	ST	SR	ST	SR	ST	SR	ST	SR	ST
ENGINES																						
DOZERS																						
CREWS																						
Number of Crews:																						
Number of Crew Personnel:																						
HELICOPTERS																						
AIR TANKERS																						
TRUCK COS.																						
RESCUE/MED.																						
WATER TENDERS																						
OVERHEAD PERSONNL																						
TOTAL PERSONNEL																						
30. Cooperating Agencies																						
31. Remarks																						
32. Prepared by						33. Approved by						34. Sent to										
												Date		Time		By						

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