ICS Form 215

										1. Incident Name				2. Date Prepared			3.	3. Operational Period (Date/Time)		
OPERATIONAL PLANNING WORKSHEET															Time Prepared					
4. 5. Division/Group or Other Location		R (Sho							esource / Strike	e by Ty Team	rpe as ST)							6. 7. Reporting Location Requested Arrival Time		
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4			
		Req										_					-			
		Have																		
		Need																		
		Req																		
		Have																		
		Need																		
		Req																		
		Have																		
		Need																		
9. Total Resources - Single Have Need		Req																		
		Have																		
		Need																		
Req Total Resources - Strike Teams Have Need		Req																	Prepared by (Name and Position)	
		Have																		
		Need																		