

APPENDIX D: REPOPULATION CHECKLIST

Incident Name:		Incident #:
Date to be initiated:		Time to be initiated:
Repopulation Area(s):		Level of Closure (No closure, or 1-4)
1.		
2.		
3.		
4.		
Repopulation Checklist:		Authorizing Name /Date/Time
<input type="checkbox"/>	Fire or emergency threat mitigated	
<input type="checkbox"/>	Utilities secured <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Telephone <input type="checkbox"/> Water	
<input type="checkbox"/>	Infrastructure hazards mitigated (roads, bridges, etc.) <input type="checkbox"/> County Roads <input type="checkbox"/> Caltrans	
<input type="checkbox"/>	Law Enforcement approval: <input type="checkbox"/> Sheriff <input type="checkbox"/> Local PD <input type="checkbox"/> CHP	
<input type="checkbox"/>	Other	
<input type="checkbox"/>	Other	
<input type="checkbox"/>	Incident Commander Approval	
<input type="checkbox"/>	Fire Agencies notified: <input type="checkbox"/> CAL FIRE <input type="checkbox"/> USFS <input type="checkbox"/> Fire District/Department	
<input type="checkbox"/>	American Red Cross notified	
<input type="checkbox"/>	Incident Information Officer notified	
<input type="checkbox"/>	Incident Liaison Officer notified	

<input type="checkbox"/>	ICS 209 updated	
Repopulation Plan Distribution:		
<input type="checkbox"/> Incident Commander(s)		<input type="checkbox"/> Operations Section Chief(s)
<input type="checkbox"/> Planning Section Chief		<input type="checkbox"/> Logistics Section Chief
<input type="checkbox"/> Finance Section Chief		<input type="checkbox"/> Public Information Officer
<input type="checkbox"/> Liaison Officer		<input type="checkbox"/> Incident Safety Officer
<input type="checkbox"/> Law Enforcement		<input type="checkbox"/> Public Officials (Mayor/ City Manager)
<input type="checkbox"/> Caltrans/Local Streets Dept		<input type="checkbox"/> Emergency Operations Center(s)
<input type="checkbox"/> County OES		<input type="checkbox"/> CAL EMA
<input type="checkbox"/> California Highway Patrol		<input type="checkbox"/>
Prepared by:		Date:
Incident Commander:		Time:
Incident Commander:		Time: