



When blank, this form is classed as **OFFICIAL**, when filled out, this form is classed as **OFFICIAL-SENSITIVE**.

Incident Name:		Time & Date:
Hazard Types 1	2:	If other:
Prepared by:	HMA: DoT	Other : _____
Local Government Area/s:	Emergency Management District/s:	
Controlling Agency:	Date/Time of activation:	

Initial incident level assessment? Yes No

The incident has been assessed by the IC as: Level One Level Two Level Three

Emergency Assessment

The occurrence or imminent occurrence of a hazard is of such a nature or magnitude that it requires a significant and coordinated response? Yes No

An Incident Support Group has been: Considered Established

After consideration of the following typical conditions, this incident declaration is based on the below assessment:

Level 2 (One or more Criteria)	Level 3 (One or more Criteria)
<ul style="list-style-type: none"> requires a multi-agency response requires coordination of multi-agency resources has a duration covering multiple shifts resources need to be sourced from district or State level there is a medium level of complexity there are multiple incident areas there is a medium - actual or imminent impact on critical infrastructure there is a medium impact on the community (social, built, economic and natural) may require delegation of a number of IMT functions the incident involves multiple hazards there is potential for the incident/or a requirement to be declared an 'Emergency Situation'. 	<ul style="list-style-type: none"> requires significant coordination of multi-agency response there is a protracted response duration resources need to be sourced from State, National and even International level there is a high level of complexity there is a significant - actual or imminent impact on critical infrastructure there is a significant impact on the community (social, built, economic and natural) may require delegation of all IMT functions evacuation and/or relocation of community is required there is an actual or potential loss of life or multiple, serious injuries a declaration of an 'Emergency Situation'

Assessment Comments

Incident Level Declaration		
Reporter's Signature:		
Name:	Agency:	Role: