INCIDENT ACTION PLAN SAFETY ANALYSIS	1. Incident Name	2. Date	3. Time

Division or Group	**Potential Hazards**								**Mitigation** (e.g., PPE. Buddy system, escape route)
	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	

Prepared by (Name and Position)

ICS-215A