

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: October 26 PSPS	2. Operational Period: Date From: 10/26/2019 Date To: 10/26/2019 Time From: 08:00 Time To: 12:00															
3. Objective(s): CUP-19-200 1. Execute the plan to personally contact 88+ Cupertino and 160 unincorporated area addresses in the affected areas.																
4. Operational Period Command Emphasis: 1. Establish the ICP at Regnart School ARK 2. Develop canvas zones from GIS Maps of affected area 3. Brief and deploy field teams 4. Use Collector App for recording progress 5. Maintain communications with all field teams 6. Report results to Bill Mitchell / Acting Emergency Director																
General Situational Awareness Weather will be sunny, high 80's.																
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Approved Site Safety Plan(s) Located at:																
6. Incident Action Plan (the items checked below are included in this Incident Action Plan): <table style="width: 100%; border: none;"><tr><td style="width: 33%;"><input checked="" type="checkbox"/> ICS 203</td><td style="width: 33%;"><input type="checkbox"/> ICS 207</td><td style="width: 34%;">Other Attachments:</td></tr><tr><td><input checked="" type="checkbox"/> ICS 204</td><td><input type="checkbox"/> ICS 208</td><td><input type="checkbox"/> _____</td></tr><tr><td><input checked="" type="checkbox"/> ICS 205</td><td><input checked="" type="checkbox"/> Map/Chart</td><td><input type="checkbox"/> _____</td></tr><tr><td><input checked="" type="checkbox"/> ICS 205A</td><td><input type="checkbox"/> Weather Forecast/Tides/Currents</td><td><input type="checkbox"/> _____</td></tr><tr><td><input type="checkbox"/> ICS 206</td><td></td><td><input type="checkbox"/> _____</td></tr></table>		<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	Other Attachments:	<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> _____	<input type="checkbox"/> ICS 206		<input type="checkbox"/> _____
<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	Other Attachments:														
<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> _____														
<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	<input type="checkbox"/> _____														
<input checked="" type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> _____														
<input type="checkbox"/> ICS 206		<input type="checkbox"/> _____														
7. Prepared by: Name: <u>Jim Oberhofer</u> Position/Title: <u>Comm SS</u> Signature: _____																
8. Approved by Incident Commander: Name: <u>Al Boleda</u> Signature: _____																
ICS 202	IAP Page <u>1</u>	Date/Time: <u>10/25/2019 12:16</u>														

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: October 26 PSPS, CUP-19-200		2. Operational Period: Date From: 10/26/2019 Date To: 10/26/2019 Time From: 08:00 Time To: 12:00		
3. Incident Commander(s) and Command Staff:		7. Operations Section:		
IC/UCs	AI Boleda	Chief	Judy Halchin	
		Deputy		
		Communications		
Deputy		Staging Area		
Safety Officer		Branch		
Public Info. Officer		Branch Director		
Liaison Officer		Deputy		
4. Agency/Organization Representatives:		Division/Group		
Agency/Organization	Name	Division/Group		
Cupertino GIS	Adam Araza	Division/Group		
		Division/Group		
		Division/Group		
		Branch		
		Branch Director		
		Deputy		
5. Planning Section:		Division/Group		
Chief	AI Boleda	Division/Group		
Deputy		Division/Group		
Resources Unit	tbd	Division/Group		
Situation Unit	tbd	Division/Group		
Documentation Unit		Branch		
Demobilization Unit		Branch Director		
Technical Specialists		Deputy		
		Division/Group		
		Division/Group		
		Division/Group		
6. Logistics Section:		Division/Group		
Chief		Division/Group		
Deputy		Air Operations Branch		
Support Branch		Air Ops Branch Dir.		
Director				
Supply Unit				
Facilities Unit		8. Finance/Administration Section:		
Ground Support Unit		Chief		
Service Branch		Deputy		
Director		Time Unit		
Communications Unit		Procurement Unit		
Medical Unit		Comp/Claims Unit		
Food Unit		Cost Unit		
9. Prepared by: Name: <u>Jim Oberhofer</u> Position/Title: <u>Comm SS</u> Signature: _____				
ICS 203	IAP Page <u>2</u>	Date/Time: <u>10/25/2019 12:24</u>		

ASSIGNMENT LIST (ICS 204)

1. Incident Name: October PSPS CUP-19-200		2. Operational Period: Date From: 10/26/2019 Date To: 10/26/2019 Time From: 08:00 Time To: 12:00			3. Branch: Division: Group: Staging Area: Regnart School ARK	
4. Operations Personnel: <u>Name</u> <u>Contact Number(s)</u>		Operations Section Chief: <u>Judy Halchin</u> <u>408-533-2517</u>		Branch Director: _____ Division/Group Supervisor: _____		
5. Resources Assigned:				Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information		
Resource Identifier	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)			
CARES	Jim Oberhofer/SS	tbd	CARES TAC3	RSA ICP		
CERT	Al Boleda	tbd	Cell Phone, GMRS	RSA ICP		

6. Work Assignments:

1. Contact each address in the affected area
2. Explain the power shutoff situation
3. Inform of City resources
4. Note if the resident requires a wellness check
5. Drop off flier regardless if they are home or not

7. Special Instructions:

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
<u>CARES UHF Repeater, TAC3</u>	<u>440.150+ PL=100.0</u>
_____ / _____	_____
_____ / _____	_____
_____ / _____	_____


9. Prepared by: Name: <u>Jim Oberhofer</u>	Position/Title: <u>Comm SS</u>	Signature: _____
ICS 204	IAP Page <u>3</u>	Date/Time: <u>10/26/2019 12:54</u>

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

1. Incident Name: October PSPS, CUP-19-100	2. Date/Time Prepared: Date: 05/11/18, 11:14 Time:	3. Operational Period: Date From: 10/8/19 Date To: 10/8/19 Time From: 12:00 Time To: 16:00
--	---	---

4. Basic Radio Channel Use:										
Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks
	1	Resource Net	TAC1	CARES	147.570W	none	147.570W	151.4	A	
	2	Message Net	TAC2	CARES	146.460W	none	146.460W	151.4	A	
	3	Command	TAC3	CARES	440.150W	100.0	445.150W	100.0	A	Rptr, W6TDM, 130VSL
	4	Alt Tactical	TAC4	CARES	441.000W	151.4	441.000W	151.4	A	Linked Cross-Band with VTAC2
	5	Alt Tactical	TAC5	CARES	147.585W	none	147.585W	151.4	A	
	6	Resource Net	TAC6	CARES	147.570W	151.4	147.570W	151.4	A	Contingency to guard against interference from Foster City
	7	Message Net	TAC7	CARES	146.460W	151.4	146.460W	151.4	A	Contingency to guard against interference
	8	Command	TAC8	CARES	440.150W	100.0	440.150W	100.0	A	Repeater output, use in the event of a repeater failure

5. Special Instructions:
 Leverage this plan from the CARES standard ICS205, last updated for CUP-18-35T. Plan is to link CARES (vhf) TAC1 Simplex with CARES (uhf) TAC3 W6TDM Repeater

6. Prepared by (Communications Unit Leader): Name: <u>Tim Borkner</u>	Signature: 
Date/Time: <u>10/24/19 1613 RETRACTIVE TO 10/8/19</u>	Date To: 10/8/19 Time To: 16:00

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name: October 26 PSPS, CUP-19-200	2. Operational Period: Date From: 10/26/2019 Date To: 10/26/2018 Time From: 08:00 Time To: 12:00
---	--

3. Basic Local Communications Information:

Incident Assigned Position	Name (Alphabetized)	Method(s) of Contact (phone, pager, cell, etc.)
Acting Emergency Director	Bill Mitchel	480-252-6401, 408-777-1333
RSA IC	Al Boleda	408-218-1152
Volunteer Supervisor	Ken Ericksen	408-215-8459
Operations Section Chief	Judy Halchin	408-533-2517
CARES Shift Supervisor	Jim Oberhofer	408-839-8798
Sheriff, non-emergency		408-299-3233, 408-299-2311
GIS Liaison	Adam Araza	916-502-7284

4. Prepared by: Name: Jim Oberhofer Position/Title: Comm SS Signature: _____

ICS 205A IAP Page 4 Date/Time: 10/25/2019 12:53