**DEMOBILIZATION CHECK-OUT (ICS 221)** 

1. I	ncident Name			2. Incident Number:			
3. Planned Release Date/Time 4. Res				source or Personnel Released:		5. N/A	
6. Resource or Personnel							
	Area	Refere	nce	Na	ame	Signature	
	a. City-Issued Equipment						
	b. Requests for personal reimbursement						
	c. Turn in, verify all Forms and Logs						
	d. Injury, health, and welfare check						
	Remarks						
			_ Positi	on / Title:		gnature:	
COES ICS221				Date / Time: v231110			

## COES ICS 221 DEMOBILIZATION CHECK-OUT Instructions (v231110)

**Purpose.** The Demobilization Check-Out (ICS 221) ensures that resources checking out of the incident have completed all appropriate incident business, and provides the Planning Section with information on resources released from the Incident. Demobilization is a planned process and this form assists with that planning.

**Preparation.** The ICS 221 is initiated by the Planning Section or Demobilization Unit Leader if designated. The Demob Unit Leader completes the top portion of the form and checks the appropriate boxes in Block 6 that may need attention after the Resource Unit Leader or designee has given the written notification that the resource is no longer needed. The individual resource will have the Demob Unit Leader or appropriate overhead personnel sign off on any checked box(es) in Block 6 prior to being released from the incident.

**Distribution.** After completion, the ICS 221 is returned to the Demob Unit Leader or the Planning Section. All completed original forms must be given to the Documentation Unit. Personnel may request to retain a copy of the ICS 221.

Block No, Title	Instructions			
1. Incident Name:	The name assigned to the incident.			
2. Incident Number:	The activation number assigned to the incident.			
3. Planned Release Date/Time:	Enter the date (mm/dd/yyyy) and time HH:MM to HH:MM of the planned release from the incident.			
4. Resource or Personnel Released:	Enter the name of the individual or resource being released.			
5. N/A	Not Applicable			
6. Resource or Personnel:	Resources are not released until the checked boxes below have been signed off. The Demob Unit Leader will enter an "X" in each box requiring the resource to be checked out, and then confirm the disposition of each item.			
	<ul> <li>a) City-issued equipment</li> <li>b) Requests for personal reimbursement</li> <li>c) Turn in, verify all forms and logs</li> <li>d) Injury, health, and welfare check</li> </ul>			
	Enter information to support dispositioning each item:			
	<ul> <li>a) Reference Field: enter any material or other logs that support this area.</li> <li>b) Name Field: enter the name of the Demob Unit Leader who checked off this entry.</li> <li>c) Signature Field: signed by the Demob Unit Leader who checked off this entry</li> </ul>			
7. Remarks:	Any additional notes, comments, or exceptions that should be documented.			
8. Prepared By:	Name, signature, and date/time of the release; signed by the Demob Unit Leader			