

1. Incident Name	2. Operational Period (Date / Time) From: _____ To: _____	DEMOB. CHECK-OUT ICS 221-OS
3. Unit / Personnel Released		4. Release Date / Time
5. Unit / Personnel You and your resources have been released, subject to signoff from the following: (Demob. Unit Leader "X" appropriate box(es))		
Logistics Section		
<input type="checkbox"/> Supply Unit _____		
<input type="checkbox"/> Communications Unit _____		
<input type="checkbox"/> Facilities Unit _____		
<input type="checkbox"/> Ground Unit _____		
Planning Section		
<input type="checkbox"/> Documentation Unit _____		
Finance / Admin. Section		
<input type="checkbox"/> Time Unit _____		
Other		
<input type="checkbox"/> _____		
<input type="checkbox"/> _____		
<input type="checkbox"/> _____		
6. Remarks _____ _____ _____ _____		
7. Prepared by: _____		Date / Time _____
DEMOB. CHECK-OUT		June 2000
		ICS 221-OS

DEMOB. CHECK-OUT (ICS FORM 221-OS)

Purpose. This form provides the Planning Section information on resource releases from the incident.

Preparation. The Demobilization Unit Leader or the Planning Section initiates this form. The Demobilization Unit Leader completes the top portion of the form after the resource supervisor has given written notification that the resource is no longer needed.

Distribution. The individual resource will have the unit leader initial the appropriate box(es) in item 5 prior to release from the incident. After completion, the form is returned to the Demobilization Unit Leader or the Planning Section. All completed original forms MUST be given to the Documentation Unit.

Item #	Item Title	Instructions
1.	Incident Name	Enter the name assigned to the incident.
2.	Operational Period	Enter the time interval for which the form applies. Record the start and end date and time.
3.	Strike Team / Unit / Personnel Released	Enter name of Strike Team, Unit or personnel being released.
4.	Release Date/Time	Enter date (month, day, year) and time (24-hour clock) of anticipated release.
5.	Strike Team / Unit / Personnel	Demobilization Unit Leader will enter an "X" in the box to the left of those units requiring check-out. Identified Unit Leaders are to initial to the right to indicate release. NOTE: Blank boxes are provided for any additional unit requirements as needed, (e.g., Safety Officer, Agency Rep., etc.)
6.	Remarks	Enter any additional information pertaining to demobilization or release (e.g., transportation needed, destination, etc.).
7.	Prepared By Date/Time	Enter name and title of the person preparing the form. Enter date (month, day, year) and time prepared (24-hour clock).