City of ______________ - Activity Log (ICS 214 – Modified) (LEM-2)

1. Incident Name: Camp Fire (DR-4407)  
2. Operational Period: Date From: Date To:  
   Time From: Time To:  

3. Name:  
4. ICS Position/Job Function:  
5. Home Agency (and Unit):  

6. Resources Assigned: (Team Members)  
<table>
<thead>
<tr>
<th>Name</th>
<th>ICS Position/Job Function</th>
<th>Regular Hours</th>
<th>Overtime Hours</th>
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7. Activity Log:  
<table>
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<tr>
<th>Start-Stop Time</th>
<th>Location/Address</th>
<th>Disaster Related Problems</th>
<th>Corrective Actions Taken</th>
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Vehicle or equipment used: Unit or I.D. # ____________ Miles driven ____________ AND hours used ____________  
Vehicle operator name:  
Government vehicle: □ Rented vehicle □ Personal vehicle □  
8. Prepared by: Name: ____________ Position/Title: ____________ Signature: ____________  
   Date: ____________
General Guidelines for Form ICS-214 - Modified

1. Form should only include disaster related events - make sure to specify that activities listed are related to the disaster and not to other routine job assignments.

2. Document if a vehicle is used for these activities. Be sure to include the vehicle number; the name of the vehicle driver; the hours the vehicle was used; AND the mileage it was driven.

3. Make sure to use the current form ICS-214 (modified) – Do Not use a standard ICS-214 form. The standard ICS-214 form does not capture enough information for disaster cost recovery purposes.

4. Make sure to sign and date the form.

5. Make sure all fields are filled out including the date from, date to, and time in, time out. Also make sure time information is accurate and matches time listed with activities on the form. Hours charged must match each individual's time card.

6. We must specify how much time was spent on each separate activity.

7. We need to specify how much time was regular time and how much was overtime.

8. Be clear when blocks of time are for routine work activities are not related to the disaster response.

9. For instance, if performing EMS services, building inspection, pipe repair, or other services that “sound” like routine job activities, we need to specify what exactly was performed (attended to broken leg, laceration, etc.) and that it was disaster related, not for a routine work assignment.

10. If making a safety inspection or performing supervisory duties clarify that the work performed is a safety inspection, or supervisory duties related to the disaster response activities. DO NOT use the term “damage assessment,” unless you are estimating the cost of disaster caused damage.

11. DO NOT use acronyms. When auditors and others review the forms, information must be crystal clear that the problems and response activities are disaster related and not routine work activities.

12. DO NOT use this form if you are part of a field crew and are using equipment, (other than a car or truck for transportation only) and materials. Use the Disaster Field Crew – Incident Work Report.

Developed by Mike Martinet at the MartinetGroup.com