

## INCIDENT RADIO COMMUNICATIONS PLAN (CRB IMS Form F)

<b>1. Incident Name:</b>	<b>2. Date Prepared:</b>	<b>3. Operational Period:</b> Date From: _____ Date To: _____
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<b>4. Basic Radio Channel Use:</b>										
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

<b>5. Special Instructions:</b>          
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<b>6. Prepared by: Name:</b> _____	Agency: _____
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<b>CRB IMS Form F</b>	<i>Adopted from FEMA ICS-205</i>	Date: _____
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