

## EOC STATUS REPORT

|                      |                             |                                |
|----------------------|-----------------------------|--------------------------------|
| Incident/Event Name: | Date Prepared (dd/mm/yyyy): | Time Prepared (24-hour clock): |
|----------------------|-----------------------------|--------------------------------|

|            |              |                   |
|------------|--------------|-------------------|
| Report No. | Prepared By: | Section/Function: |
|------------|--------------|-------------------|

**OUTSTANDING ISSUES FROM LAST EOC INCIDENT ACTION PLAN:**  
What issues within the current operational period still need to be resolved?

**CURRENT SITUATION/UPDATE:**  
What is the current situation within the area/responsibility for the Section/Function?

**ANTICIPATED PRIORITIES/CHALLENGES:**  
What are some challenges looking ahead that may become a problem or issue?

**OTHER COMMENTS/ISSUES:**  
Are there any public information (media), safety or other issues that need to be reviewed?

Distribution:  
\_\_ Mgmt. Team \_\_ Planning \_\_ Communications \_\_ EOC Personnel \_\_ Other: \_\_\_\_\_