**Delegation of Authority**

**For**

***[insert incident name]***

You have full authority and responsibility for managing incident operations within the framework of legal statutes, current policy, and the broad direction provided in both your oral and written briefing materials. You are accountable to me as the Agency Administrator (AA) for ***[insert incident name]***.

Your AHIMT is being delegated the authority and responsibility for the overall incident response within the jurisdictional boundaries of ***[insert a description of the jurisdiction the AHIMT is responsible for]***. Additional AHIMTs have been requested to take responsibility for other areas in the ***[insert name of the jurisdiction]***.

Your primary responsibility is to organize and direct all assigned personnel and resources to manage the incident and minimize additional suffering and damage. I have the following expectations of any incident management organization that works for ***[insert the name of the AA’s jurisdiction]***. If these expectations are unclear or unattainable, we can discuss potential alternatives.

1. All operations will be conducted with the safety of the public and responders in mind. Protection of life is your highest priority.
2. Accountability for safety is your first and most important responsibility. All members of your team must observe a Zero Tolerance for any careless or unsafe action. As Incident Commander, take the appropriate actions to ensure that everyone involved in managing this incident knows and follows nationally recognized safety practices.
3. Give special consideration to First Responder safety, especially with respect to aviation operations and working around heavy equipment. When there are competing priorities, life safety should be the highest priority in your strategic and tactical decisions, rather than jeopardizing responder and public safety.
4. All incident-related operations within your area of responsibility will be coordinated with the respective departments and agencies of ***[insert name of the affected jurisdiction.]*** A map your area of responsibility will be provided.
5. Manage equipment and supplies to ensure minimum losses.
6. Provide public information regarding progress of the response and the hazards and risks to the public. Coordinate the activities with the ***[insert jurisdiction name]*** Public Information Office.
7. Your AHIMT will directly coordinate with all appropriate local and state agencies.

Your Incident Objectives should include some of my following priorities:

* 1. Ensuring that Search and Rescue of the area is completed, collapsed structures are stabilized and searched, and the injured or deceased removed
  2. Extinguishing fires and preventing any additional fires
  3. Providing for the safety and protection of the responders and the public
  4. Assisting ***[insert the name of the agency responsible for fatalities]*** in providing for fatalities
  5. Working with ***[insert name of the agency responsible for the water service]*** and ***[insert name of the gas utility]*** to stabilize the area and shut off the water and natural gas leaks
  6. Obtaining initial damage assessments of the area
  7. Initiating an investigation as to the cause of the incident
  8. Working with law enforcement to assist them in traffic control and security
  9. Assisting the public in locating and reuniting with missing family members. If necessary, establishing family reunification centers
  10. Working with ***[insert utility company names for water and gas services]*** utilities to determine assistance needed for the restoration of natural gas and domestic water supplies
  11. Maintaining accurate financial, liability, and damage records in anticipation of local, state, and Federal disaster declarations and potential cost recovery

A formal evaluation of your performance will be conducted prior to your departure from the incident. This formal evaluation may be followed up within 60 days after your departure once ***[insert name of the AA’s agency]*** has had the opportunity to review accountability, claims, financial matters, and other items, which take time to evaluate.

This Delegation of Authority will be effective at the conclusion of our briefing.

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***[insert AA’s name]*** Date

***[insert AA’s title and agency]***

I accept the assignment as per this Delegation of Authority.

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Incident Commander

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Agency Date