

Billed:

Yes

N/A

WARREN COUNTY FIRE ACADEMY

1024 Route 57 Washington, NJ 07882-9618 Office: 908-835-2068 Fax: 908-835-2067



wcfa@co.warren.nj.us

Drill Ground Request Form

Please submit at least (2) two weeks prior to the requested activity

Department / Company MUST provide an EMT for all activities.

Date of Request	Department Name		Date of Drill
Requestor Name	Requestor R	ank Reques	tor Email
Activity Requested:		Live Bu	rn Scenario Requested:
	(If WCFA needs to provide E	MT a \$15.00/hr. fee will be a	ccessed. Minimum of 3hrs.)
EMT Name		EMT ID Nun	nber
	Department	: Authorized Signature Block	
activity are Firefighter 1 dayailable to any member and medical monitoring pudgetary and staffing co	certified, that basic life support requiring assistance due to an procedures will be in effect. I up ponstraints as well as extreme v	assets are provided by the on injury or other medical issuum anderstand that this is a requiveather may preclude training	urance, that all participants of any live fire department and will be immediately e, and that the department rehabilitation lest for a drill ground activity and that g from being run. Departments are ffing and review the date will be confirmed
Requestor Signature	Typed signature will be acceptable	for electronic submission	
	(See 2nd page	for additional information)
	Ac	ademy Use Only	
Date Rec.	Ins. Cert. on File	Staffing minimum met	Confirmation sent

Date Billed

The department requesting the drill is expected to provide the necessary equipment and/or supplies it needs to perform the drill. This includes but is not limited to the following examples:

- Hay
- Plywood
- Pressboard
 - Vehicles
- Extinguishers
- Fuels for extinguisher pad
 - Other materials

If these materials need to be provided by the Fire Academy the requesting department will be assessed at a rate not to exceed the Fire Academies cost.