NC FOREST SERVICE  
FIRE DEPARTMENT REQUEST FORM  
FEDERAL EXCESS PERSONAL PROPERTY  
(ONLY AVAILABLE TO FIRE DEPARTMENTS IN NORTH CAROLINA)

### FIRE DEPARTMENT CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Date of Application:</th>
<th>County:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire Department Name:</td>
<td></td>
</tr>
<tr>
<td>Fire Department Mailing Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State: NC</td>
</tr>
<tr>
<td>Fire Department Phone#:</td>
<td></td>
</tr>
<tr>
<td>Fire Chief's Name:</td>
<td></td>
</tr>
<tr>
<td>Fire Chief's phone# (day):</td>
<td>Fire Chief's email:</td>
</tr>
<tr>
<td>Fire Department's Contact name and title, if other than Chief:</td>
<td></td>
</tr>
<tr>
<td>Contact's phone #/(day):</td>
<td>Contact's email:</td>
</tr>
</tbody>
</table>

FIRE DEPT MUST BE WILLING TO TRAVEL POSSIBLY OUT OF STATE TO PICKUP EQUIPMENT AND HAVE THEIR OWN TRANSPORT/HITCH THAT IS NEEDED TO PICKUP THE EQUIPMENT.

### TYPE OF EQUIPMENT REQUESTED

(Fire Department may request more than one vehicle and/or piece of equipment.)

- [ ] PICKUP Truck  
  - [ ] Regular Bed  
  - [ ] 2x4  
  - [ ] 4x4  
  - [ ] Utility Body  
  - Reason for need: ____________________________

- [ ] 2 ½ ton Truck  
  - Reason for need: ____________________________

- [ ] 5 ton truck  
  - Reason for need: ____________________________

- [ ] 4x4 Sport Utility Vehicle  
  - Reason for need: ____________________________

- [ ] Generator  
  - Output Capacity:  
    - [ ] 5 kW  
    - [ ] 10 kW  
    - [ ] 15 kW  
    - [ ] 30 kW  
    - [ ] 60 kW  
    - [ ] 100 kW  
    - [ ] 200 kW  
  - Reason for need: ____________________________

- [ ] Tanker truck  
  - Reason for need: ____________________________

- [ ] Pumper Truck  
  - Reason for need: ____________________________

- [ ] Utility Van/Box Truck  
  - Reason for need: ____________________________

- [ ] Trailer  
  - [ ] Enclosed/Box  
  - [ ] Flatbed  
  - Reason for need: ____________________________

- [ ] Other Equipment  
  - Describe: ____________________________  
  - Reason for need: ____________________________  
  - (See list below, no other items should be listed)

<table>
<thead>
<tr>
<th>Items allowed through FFP/DoD (donation program)</th>
<th>Items allowed through FEPP (loan program)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Titled vehicles (HMMWVs not allowed)</td>
<td>Generators</td>
</tr>
<tr>
<td>Extrication equipment</td>
<td>Light towers</td>
</tr>
<tr>
<td>Hoses, nozzles, pumps</td>
<td>Titled vehicles (HMMWVs not allowed)</td>
</tr>
<tr>
<td>Fresh air compressors</td>
<td></td>
</tr>
<tr>
<td>Light towers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fabrication materials</td>
</tr>
<tr>
<td></td>
<td>Forcible entry tools</td>
</tr>
<tr>
<td></td>
<td>Generators</td>
</tr>
</tbody>
</table>
Population of Fire District: ________________________________

Indicate or describe legal basis for organization.

☐ Chartered    ☐ Incorporated    ☐ Non-Profit    ☐ Created by ordinance

Other? Explain: ________________________________________________

Describe revenue sources. (Check all that apply and attach additional information in necessary)

☐ Tax Funds? If so, what is the rate? _______________________________

☐ Contributions?

☐ County Appropriations?

Other? Explain: ________________________________________________

Does this department limit responses to those members that contribute or pay dues?

☐ YES    ☐ NO

Is this department certified with the North Carolina Department of Insurance?

☐ YES    ☐ NO

Does this department respond to mutual aid requests?

☐ YES    ☐ NO (If YES, check all that apply)

☐ Responds ONLY within fire district? ☐ Responds to adjacent fire districts?

☐ Responds county wide? ☐ Responds to other counties?

FEPP GUIDELINES (LOAN PROGRAM)-Key Points –

- Equipment cannot be sold, traded, junked, or given away. It must be returned to the NCFS when no longer needed.
- FEPP is for “Fire Use Only”! Personal use is not permitted!
- All FEPP must be well maintained, secured and stored to prevent theft or vandalism. Water handling equipment must be housed in a heated building.
- Tank size and baffles – The VFD must not exceed the GVWR as stated on the data plate for a vehicle when equipping or modifying vehicles and equipment for use. All tanks must be baffled in accordance with NFPA1901 or 1906 standards.
- All vehicles must be insured to meet the State of NC’s basic liability insurance coverage requirements as specified which are $100,000 per person bodily injury, $300,000 bodily injury in one accident, and $50,000 property damage.
- A current NC vehicle inspection must be maintained on all vehicles.
- Must convert equipment for fire suppression use and paint equipment to match other department owned equipment within nine (9) months

FPP/DOD GUIDELINES (DONATION PROGRAM) Key Points

- For motor vehicles, insurance must be obtained for the duration of this agreement, liability insurance in the amount of at least $100,000 per person bodily injury, $300,000 bodily injury in one (1) accident and $50,000 property damage.
- Equipment must be converted into a viable fire fighting unit and must be painted to ensure there are no military colors or markings on the equipment. Equipment must be in operating condition and ready for service within TWELVE (12) MONTHS from the date that the equipment was received.
- Must ensure that add on tanks, pumps, hose reels, etc., will not cause the vehicle in this agreement to exceed the GVWR
- Must make equipment available for a final inspection once ready to be put into service.
- Equipment must be for the exclusive use of fire fighting. Equipment must be in operation for a minimum of 2 years before disposal.
- NCFS must be notified 60 days prior to disposing of FFP equipment

The applicant certifies that to the best of their knowledge and belief the information in this application is correct and the guidelines will be adhered to if receiving equipment.

Signature & Title of Fire Department Chief or President of Board of Directors Date
FIRE DEPARTMENT: ____________________________ DATE: __________

FOR NCFS USE ONLY

COUNTY RANGER’S COMMENTS:

COUNTY RANGER’S SIGNATURE: ________________ DATE: _________

DISTRICT RANGER’S COMMENTS:

DISTRICT RANGER’S SIGNATURE: ________________ DATE: _________

STATE FIRE DEPT COORDINATOR’S COMMENTS:

STATE FIRE DEPT COORDINATOR’S SIGNATURE: ________________ DATE: _________

Please return this completed form to your local County Forest Ranger.