



# GENESEE COUNTY OFFICE OF EMERGENCY MANAGEMENT

7690 State Street Road, Batavia, New York 14020

Phone: (585)344-0078 24/7 Emergency Contact: (585)343-3311 Fax: (585)345-3098

Email completed forms to: [Tyler.lang@geneseeny.gov](mailto:Tyler.lang@geneseeny.gov)

## FIRE DEPARTMENT REQUEST FOR USE OF LIVE BURN TRAINING FACILITY *One Week Advanced Notice*

Fire Department(s): \_\_\_\_\_

Date of Request: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of Use: \_\_\_\_/\_\_\_\_/\_\_\_\_

Time of Use: \_\_\_\_\_

**Please check the box for a training objective (check as many as you need):**

- ☐ SCBA Confidence (Maze)
- ☐ Forcible entry (Blue Door)
- ☐ Roof Operations/Ladder Training (Roof Prop)
- ☐ Survival Type Drills (Wall breach, Tunnel, Tube)
- ☐ Engine Company Operations (Tower)
- ☐ On Scene Operations (Tower, Roof)
- ☐ Mutual Aid Training (Tower)
- ☐ Live Fire (30 day notice needed)

**Please provide a brief overview of your training goals:**

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**Are you looking for an instructor, or someone to support you in your training?**

- ☐ Instructor (Provide instruction on the specific topic)
- ☐ Facilitator (support you in your training.) (i.e.: fill cylinders, setup and takedown of props, maintain a safe training facility)

**Officer Making Request:** \_\_\_\_\_ **Phone #** (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

**Fire Department Chief:** \_\_\_\_\_ **Phone #** (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

**Signature of Fire Chief:** \_\_\_\_\_

**(Office use only)**

**Assigned Instructor/Facilitator:** \_\_\_\_\_

**Sign in sheet for the Genesee County Fire Training Facility:**

[illegible]