

CHECK LIST FOR VOLUNTEER FIRE DEPARTMENTS

- _____ VOLUNTEER FIRE DEPARTMENT SUPPLEMENTAL APPLICATION (completed by agent)
- _____ FEIN NUMBER
- _____ POPULATION SERVED ON FIRST-CALL BASIS
- _____ YEARS IN OPERATION
- _____ ANNUAL NUMBER OF FIRE CALLS
- _____ LIST OF FUND-RAISING ACTIVITIES
- _____ LIST OF ANY AUXILIARY OR SUPPORT GROUPS
- _____ AMOUNT OF MOBILE PROPERTY COVERAGE
- _____ PROPERTY INFORMATION: (year built, square footage, roof type, construction type)
- _____ LIST OF VEHICLES (year, make, model, V.I.N. #)
- _____ LIST OF VOLUNTEERS (name, date of birth, years experience, drivers license number, date hire)
- _____ LIST OF ANY LOSSES FOR THE LAST FIVE YEARS
- _____ COPY OF RECENT AUDIT
- _____ COPY OF CURRENT INSURANCE POLICY