

Applicants Name: _____

Application Number: _____

Risk Address: _____

1. Residence Use? Primary Secondary Seasonal
Roof Type? Composition Wood Shake Metal Other: _____
Proximity to Brush/Wildfire Exposure? None 1000' or more 250'-1000'
Is Property Visible from Street and to Neighbors? Yes No
Is there a Central Station: Fire Alarm Burglar Alarm
Distance to Responding Fire Station? _____ Response Time? _____
Distance to Fire Hydrant? _____ or Other water source? _____ (if catchment, complete below)
If Other how much water is available? _____ Accessibility? _____
Description? _____
Roads are: Paved: Yes No
Accessible Year-Round: Yes No

2. Name of Responding Station? _____ Phone Number: _____
Paid or Volunteer
Number of Full-Time or Live-In Employees _____
Number of Pumps? _____ Pumping capacity (GPM)? _____
Number of Tankers? _____ Pumping capacity (GPM)? _____

3. Catchment System? Yes No
If Yes, Number of Gallons: _____
Is the tank equipped with a 2 ½ inch National Standard Thread outlet pipe? Yes No

4. Comments: _____

5. Driving Directions: (Include Nearest Major Cross Streets) _____

X _____
APPLICANT'S SIGNATURE

_____ DATE