**FIRE DEPARTMENT REGISTRATION FORM**

**Please Type or Clearly Print Information**
Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m)].

Date: __________________________

Name of Fire Department: ___________________________________________

Street Address of Main Station: _________________________________________

Mailing Address: _________________________________________________________

________________________________________, WI ___________________ County:

Name of Designated Fire Chief: _________________________________________

Date (Month/Year) Fire Chief Originally Elected or Appointed:

Fire Chief Phone: (FD Non-Emergency) : (___ ___) ___ ___ - ___ ___ ___ __ Best Time to Call: ________________

Alternate Phone: ____________________  Fire Chief E-mail: ______________________

Name of Lead Fire Inspector: ____________________________________________

Lead Fire Inspector Phone: _____________________  Best Time to Call: ______________

Lead Fire Inspector E-mail: ________________________

Name of Public Fire Education Officer: ______________________________________

Public Fire Education Officer Phone: (___ ___) ___ ___ - ___ ___ ___ __ Best Time to Call: ________________

Public Fire Education Officer E-mail: __________________________

Name of NFIRS Contact: _________________________________________________

NFIRS Contact Phone: (___ ___) ___ ___ - ___ ___ ___ __ Best Time to Call: ________________

NFIRS Contact E-mail: __________________________

FAX Number for Fire Department Business: (___ ___) ___ ___ - ___ ___ ___ __

**Fire Department Pay Status:**

<table>
<thead>
<tr>
<th>Fire Department Pay Status</th>
<th>Fire Department Organization</th>
<th>Roster:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 ( ) Career</td>
<td>( ) Chapter 180</td>
<td>Number of Current Members: _____</td>
</tr>
<tr>
<td>2 ( ) Combination</td>
<td>( ) Chapter 181</td>
<td>Number of Firefighters: ______</td>
</tr>
<tr>
<td>3 ( ) Volunteer</td>
<td>( ) Chapter 213</td>
<td>Number of Fire Inspectors: ______</td>
</tr>
<tr>
<td>#___ ( ) Other*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PAY STATUS KEY**
For further pay status definitions, please see our website:

SBD-10638 (R. 07/16)  
(OVER)
**Municipalities:**
List each municipality that is located within the territory served by this fire department. Designate whether Town, Village, or City of: (example; Municipality: Town of Adams County: Adams). Place an X behind the type of services provided.

1. Municipality________________________________________________ County: __________________________
   Fire Protection: _____   Fire Prevention: _____    Effective Date for Services Provided: _____________________

2. Municipality________________________________________________ County: __________________________
   Fire Protection: _____   Fire Prevention: _____    Effective Date for Services Provided: _____________________

3. Municipality________________________________________________ County: __________________________
   Fire Protection: _____   Fire Prevention: _____    Effective Date for Services Provided: _____________________

4. Municipality________________________________________________ County: __________________________
   Fire Protection: _____   Fire Prevention: _____    Effective Date for Services Provided: _____________________

5. Municipality________________________________________________ County: __________________________
   Fire Protection: _____   Fire Prevention: _____    Effective Date for Services Provided: _____________________

6. Municipality________________________________________________ County: __________________________
   Fire Protection: _____   Fire Prevention: _____    Effective Date for Services Provided: _____________________

7. Municipality________________________________________________ County: __________________________
   Fire Protection: _____   Fire Prevention: _____    Effective Date for Services Provided: _____________________

8. Municipality________________________________________________ County: __________________________
   Fire Protection: _____   Fire Prevention: _____    Effective Date for Services Provided: _____________________

**FIRE DEPARTMENT REGISTRATION**

A fire department that provides fire protection and fire prevention services to a municipality is required to register with the Department. In the fire dues process, fire department means a municipal fire department, public safety department, or public or private organization, such as a fire association, fire district, fire company or fire corporation, organized or created for the purpose of extinguishing fires and preventing fire hazards.

By statute, for the prevention of fire hazards, the chief of the fire department is constituted a Deputy of the Department of Safety and Professional Services. Registration is required to issue the Deputy ID card to the fire chief, and to ensure that the fire department receives their fire dues funding from the municipalities served by the fire department.

**Questions about this form?** Contact the Fire Prevention Program at DSPSSBFireDues@wisconsin.gov.