



FIRE DEPARTMENT REGISTRATION FORM

INDUSTRY SERVICES DIVISION
Fire Prevention Program
P.O. Box 7302
Madison, Wisconsin 53707-7302
TTY: Contact Through Relay

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: _____

Cell 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: (____) ____-____

<u>Fire Department Pay Status:*</u>	<u>Fire Department Organization:</u>	<u>Roster:</u>
1 (<input type="checkbox"/>) Career	(<input type="checkbox"/>) Chapter 180	Number of Current Members: _____
2 (<input type="checkbox"/>) Combination	(<input type="checkbox"/>) Chapter 181	Number of Firefighters: _____
3 (<input type="checkbox"/>) Volunteer	(<input type="checkbox"/>) Chapter 213	Number of Fire Inspectors: _____
#____ (<input type="checkbox"/>) Other*	(<input type="checkbox"/>) Municipal	Number of Apparatus: _____
	(<input type="checkbox"/>) Tribal	

***PAY STATUS KEY** For further pay status definitions, please see our website:
<https://dps.wi.gov/Documents/Programs/FirePrevention/Definitions.pdf>

- 1 – Career
- 2 – Combination
- 3 – Volunteer
- 4 – Affiliate
- 5 – Federal/State/Military
- 6 – Private

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.