



**INDIANA COUNTY FIRE ACADEMY
SITE USE REQUEST FORM**

DATE OF REQUESTED USE: _____ **DATE SUBMITTED:** _____

COMPANY REQUESTING USE: _____

CONTACT PERSONS NAME: _____

MAILING ADDRESS: _____

TELEPHONE#: _____

INSTRUCTOR/DEPARTMENT OFFICER IN CHARGE: _____

TYPE OF EVENT USE:

___ **DEPARTMENT DRILL (Live Fire)** ___ **STRUCTURE BURN COURSE**

___ **CONFINED SPACE** ___ **CLASSROOM**

___ **PUMP TRAINING** ___ **VEHICLE RESCUE**

___ **ROPE/HIGH ANGLE** ___ **FLAMMABLE LIQUIDS/FOAM**

___ **HAZMAT** ___ **EXTINGUISHER**

OTHER (SPECIFY): _____

LIST ALL PARTICIPATING DEPTS: _____

TOTAL COST: \$ _____

(Signature of Requesting Person)

RETURN THIS FORM TO:

**Tom Stutzman
85 Haven Dr
Indiana PA 15701**

REQUIREMENTS: The Lead Instructor or Department Officer in Charge must have a copy of and comply with the "Procedure Manual for the Indiana County Fire Academy Site". This form must be completed and submitted before the date of requested use or use can not be guaranteed.. Pa DEP Permits must be completed prior to any live fire or extinguisher training is permitted. Course offerings must be compliant with PA State Fire Academy and Local Fire Academy standard operating policies and procedures.