

DeKalb County Fire Department

Purchase Request Form

Officer name/title making request:

Date of Request: _____

Description of item(s) requested:

Reason for request: (new purchase, lost, damaged, replacement, etc.)

If damaged, is it possible to make repairs to the equipment?

If no, explain:

If lost or damaged, who was responsible?

Was this a negligent action? _____ If yes, explain:

Estimated cost of equipment requested:

Requesting Officer's Signature: _____