

**DeKalb County Fire Department  
Application to Hold the Office of  
Equipment Officer**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth (mm/dd/yy): \_\_\_\_\_

**Please answer the following questions with “yes” or “no”:**

1. Are you currently serving as a Lieutenant or Captain? \_\_\_\_\_
2. Do you have at least 1 year experience serving as Lieutenant, or above, with the DCFD? \_\_\_\_\_
3. Are you mechanically inclined? \_\_\_\_\_
4. Have you served a minimum of 2 years on the DCFD? \_\_\_\_\_
5. Do you have good organizational skills? \_\_\_\_\_
6. Have you completed the Pumper Maintenance (FA105) course?  
\_\_\_\_\_ (if yes, attach certificate)

**Applications must be submitted no later than December 31 of each year, prior to the annual officer elections in January.**