



**Annual Fire Department Equipment Certificate**  
**Annual Due Date: October 31**

**Type Department:** Volunteer  Paid  Combination   
 Incorporated\*  Unincorporated\*\*  Special Purpose \*\*\*

**Date:** \_\_\_\_\_ **Reporting Year:** \_\_\_\_\_

**FDID:** \_\_\_\_\_

**Fire Department Name:** \_\_\_\_\_

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

**County:** \_\_\_\_\_

**Active Members Total:** \_\_\_\_\_

Does your fire department have a certified fire inspector? Yes  No   
 Has your fire district adopted a building and inspection code? Yes  No   
 As required by law, is your fire district a member and in good standing with the S.C. State Firefighters' Association? Yes  No

Total Firemen's Fund Balance as of June 1, \_\_\_\_\_ : \_\_\_\_\_  
 Total Value of Fire Apparatus and Equipment:  
 (Total equipment must be valued at \$10,000 or more) \_\_\_\_\_

**Apparatus:**  
 Number of Aerials and Ladder Trucks: \_\_\_\_\_  
 Number of Pumping Engines: \_\_\_\_\_

**Water Supply Ownership:** Private  Public

**Source of Water Supply:** Public Hydrants  Lakes/Ponds  Dry Hydrants

Number of trustees on the Firemen's Insurance and Inspection Fund Board as required by Statute 23-9-310: \_\_\_\_\_

**Contact name/phone of person completing the certificate:**  
 \_\_\_\_\_

*The signature below certifies this Equipment Certificate for the fire department listed.*

**SIGNATURE(S)** \_\_\_\_\_

**Title:** \_\_\_\_\_

*Required Signatures:* \*Incorporated department: Town/city clerk  
 \*\* Unincorporated: Fire chief and county treasurer  
 \*\*\*Special purpose: Person responsible for finances