

**ANNUAL FIRE DEPARTMENT EQUIPMENT CERTIFICATE**

**South Carolina Department of Labor, Licensing and Regulation**

**Division of Fire and Life Safety**

**Office of State Fire Marshal**

**141 Monticello Trail**

**Columbia, SC 29203**

**803-896-9802 (Office)**

**803-896-9806 (Fax)**

Date: \_\_\_\_\_  Incorporated Department \*  Type Department  
Or  
Reporting Year \_\_\_\_\_  Unincorporated Department\*\*  Volunteer  
Or  
FDID: \_\_\_\_\_  Special Purpose Department \*\*\*  Paid  
 Combination

Name of Fire Department: \_\_\_\_\_

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

Number of Active Members: \_\_\_\_\_

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 now a member and in good standing with the South Carolina 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 & Ladder Trucks: \_\_\_\_\_

Number of Pumping Engines: \_\_\_\_\_

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: \_\_\_\_\_

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

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

\*If the department is incorporated, please have the town or city clerk sign this form.

\*\* If the department is unincorporated, please have the fire chief and county treasurer sign this form.

\*\*\*If the department is special purpose, please have the person responsible for finances sign this form.

*The equipment certificate is due annually by October 31<sup>st</sup> but can be filed with the State Fire Marshal's Office June 1 - October 31 for the reporting year.*