

**Application for  
Suffolk County Volunteer Firemen's Association  
"Firefighter of the Year" Award**

All questions must be answered. If not applicable, please write in N/A  
Include cover letter describing act, fire report and news articles if applicable.

Date: \_\_\_\_\_

Name of nominee: \_\_\_\_\_

\_\_\_\_\_

Fire Department affiliation: \_\_\_\_\_

Years of service: \_\_\_\_\_ Type of Incident: \_\_\_\_\_

Reason for action: \_\_\_\_\_

Date of act: \_\_\_\_\_ Time of act: \_\_\_\_\_

Location: \_\_\_\_\_

Duration of alarm: \_\_\_\_\_ Number of responders: \_\_\_\_\_

Weather conditions: \_\_\_\_\_

Type of Structure: \_\_\_\_\_

Size of Structure: \_\_\_\_\_

Occupancy Type: \_\_\_\_\_

Conditions on arrival: \_\_\_\_\_

Name of person (s) rescued: \_\_\_\_\_

\_\_\_\_\_

Ages: \_\_\_\_\_

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Describe where victim (s) were found: \_\_\_\_\_

\_\_\_\_\_

Describe injuries to victim(s) and / or rescuer (s): \_\_\_\_\_

\_\_\_\_\_

Victim status: \_\_\_\_\_

Describe the level of protective gear worn: \_\_\_\_\_

Breathing Apparatus worn and used: \_\_\_\_\_

Were protective hose streams used? \_\_\_\_\_

How? \_\_\_\_\_

Give detailed description of the action: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and rank of person submitting report: \_\_\_\_\_

Telephone contact: \_\_\_\_\_

Cover Letter attached: \_\_\_\_\_

Fire Report attached: \_\_\_\_\_

News Articles attached: \_\_\_\_\_