

LITCHFIELD COUNTY FIRE CHIEFS EMERGENCY PLAN, INC.

P.O. BOX 335

PLEASANT VALLEY, CT 06063

MEMBERSHIP APPLICATION BLANK

DATE: _____

NAME: _____

STREET: _____

TOWN: _____ ZIP: _____

TELEPHONE: (H) _____ (C) _____

FIRE / EMS DEPARTMENT: _____

E-MAIL: _____

PROPOSED BY: _____

TEN DOLLARS MUST ACCOMPANY THIS APPLICATION

.....
FOR OFFICE USE ONLY

FIRST READING: _____ SECOND READING: _____

ACCEPTED: ____Y____N____

DATE DUES PAID: _____