NOTE: Application for examination is due at least ten (10) days prior to the scheduled examination. Late applications will not be accepted or processed.

Please PRINT all information legibly as it will appear on your permanent records. Both the instructor and candidate must complete this entire application prior to submission.

APPLICANT DATA

Last name _______________________________ First name ___________________ M I __________________

Home Street Address ____________________________

Town __________________ State __________ Zip Code ____________

Telephone
Home __________________ Work __________________ Cell __________________

Fire Department Name: ____________________________

Fire Department City/Town: ____________________________

Fire Fighter (Check One):
Career  ☐  Volunteer  ☐

Email Address: ____________________________

ID Number __________ - ____________
Your ID consists of the first (3) letters of your last name and the last four (4) numbers of your social security number.
Example: John Adams – SS # 000-00-5555
The new ID # will be ADA-5555

Prerequisite Certification Level – Check to indicate compliance with the certification prerequisite
☐ State of Connecticut Certified Firefighter I
OR  ☐ Active member of a fire department with continuous service on or before July 1, 1977. Verification must be attached.
AND  ☐ State of CT Certified Driver Operator - Pump

WRITTEN EXAMINATION DATA

Examination Date ____________________________

The Certification Unit must receive applications a minimum of 10 business days prior to the requested examination date.
Late applications will not be accepted or processed.

Examination Location ____________________________

License Data

Motor Vehicle License Number ____________________________

Q Endorsement  ☐ CDL  ☐

Expiration Date ____________________________

Candidate Initials ____________________________

Copy Attached ☐

Instructor Initials ____________________________

A Legible copy of the appropriate motor vehicle driver’s license (CDL or CT license with Q endorsement) MUST be attached to this application.

$35.00 application fee required with application. Please check type of payment below:

Check (please indicate check # and date)

☐ VISA  ☐ MasterCard # ____________________________ Security Code ___ ___ ___

Card Holder’s Name: ____________________________

Card Holder’s Signature ____________________________

Expiration Date: ____________________________

DO NOT SEND CASH

By my signature below, I certify that the above information is true and correct to the best of my knowledge and that I will be at least 18 years of age on the date of the examination. I understand that intentionally making a false statement on this application will result in revocation of certification.

Applicant’s Signature ____________________________ Date ____________________________

Remit completed application and fee to: Commission on Fire Prevention and Control

34 Perimeter Road

Windsor Locks, CT  06096-1069

C31-12/18
DRIVER OPERATOR MOBILE WATER SUPPLY - TANKER – NFPA Standard 1002 Compliance

All objectives of NFPA Standard 1002, 2017 Edition, Chapters 4 and 10, “Mobile Water Supply Apparatus”, must be addressed by an approved training methodology prior to acceptance into the certification testing process. Check off below the methodology utilized for this examination application:

### Practical Skills Evaluation Sheets

Each candidate for Driver Operator- Mobile Water Supply Certification must be provided with, exposed to, and evaluated on all Driver Operator- Mobile Water Supply Practical Skills Evaluation Sheets in preparation for Certification Testing. The Candidate’s initials in this section acknowledge receipt of a copy of all Driver Operator- Mobile Water Supply Skills Evaluation Sheets.


| Compliance Method 1 - Successful completion of the Connecticut Fire Academy Driver Operator – Mobile Water Supply-Tanker training program |
| Compliance Method 2 - Proof of National Board on Fire Service Professional Qualifications, Inc. or International Fire Service Accreditation Congress Driver Operator - Mobile Water Supply accredited certification |
| Compliance Method 3 - Examination Challenge – Director of Certification approval required |

Driver Operator Mobile Water Supply – Tanker Practical Skills Compliance

All psychomotor objectives of NFPA Standard 1002, 2017 Edition, Chapters 4 and 10, “Mobile Water Supply Apparatus”, must be successfully completed as the result of in-class activities and/or assignments or as the result of stand-alone assignments. Methodology utilized for compliance must be evaluated by other than the subject instructor. The date of successful completion and evaluator initials must be entered for all Skill Sheets below.

<table>
<thead>
<tr>
<th>SS Number</th>
<th>Skill Sheet Title</th>
<th>Date of Completion</th>
<th>Evaluator Initial(s)</th>
<th>Certification only</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.1.1A</td>
<td>Preventive Maintenance (Specific)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.2.1A</td>
<td>Maneuver and Position Mobile Water Supply – Fill Site</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.2.2A</td>
<td>Maneuver and Position Mobile Water Supply – Dump Site</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.2.3A</td>
<td>Establish a Water Shuttle Dump Site</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

By signing below, I certify that this candidate is a graduate of a training program designed to meet or exceed the requirements of NFPA 1002, Chapter 10, 2017 edition. This candidate has achieved satisfactory scores on all examinations, demonstrated proficiency in all skill evaluations identified for that level by having been observed and evaluated by a certified and qualified Fire Service Instructor in the accomplishment of these skills, per Regulations of Connecticut State Agencies, Section 7-323l. I have reviewed all training records indicating dates and times of training and verified that this candidate is prepared for the certification process.

Lead Instructor Printed Name

Telephone Number

Lead Instructor Signature

Date