



**State of Connecticut
Department of Emergency Services & Public Protection
Commission on Fire Prevention and Control**

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1. Deadline Pending: Accelerated On-Line FF 1 and FF 2

The Burrville Fire School announces their on-line accelerated classes for this summer. These are fast moving, demanding courses of study/practice. You are expected to make *all* of the classes. You must be a self-motivated student who is comfortable with on-line learning.

Mandatory orientation will be at 6 PM on May 15th at the Bantam Fire Company in Bantam.

Firefighter 1 will begin on May 16th at the Bantam Fire Company. It will run on Monday & Wednesday nights from 6 PM to 10 PM. It is approximately 3-months in length. The state practical exam will be on August 5th. The cost is \$1,050 and includes the course text.

Firefighter 2 will begin on May 17th at the South End VFD (Nepaug) in New Hartford. It will then run on Tuesday and Thursday nights from 6 PM to 10 PM. It is approximately 2-months in length. The state practical will be on July 8th. The cost is \$850. This does not include a text (which can be purchased separately). The text is available to all as an on-line e-book and downloadable audio book.

The deadline for applying is May 1st. **After May 1st there will be a 10% late fee.**

For more information, contact Richard Marcus at 860-307-2267 or richardmarcus@earthlink.net
An application is attached.

2. Fairfield Regional Fire School Notice

Attention: Chiefs and Training Officers

After two long years, the Fairfield Regional Fire School is almost ready to re-open its doors to a new state of the art facility! In anticipation of this day, the crew at FRFS is working to organize a calendar of upcoming programs, descriptions of new props, and updated procedures. We are requesting departments that are potentially interested in utilizing the facility take a moment to complete a google form by following the link below so we can update our contact records. This will help us get our information to the appropriate parties.

<https://goo.gl/forms/DbW05kNlnu8UniEx1>

Please follow the link above to complete the customer contact form

Denise Sherwood

Administrative Assistant

Fairfield F.D. | Fairfield Regional Fire School

205 Richard White Way, Fairfield, CT 06824

203-254-4708 – Fax (203) 254-4719

3. Fire Officer II – North Madison - Beginning on May 6th

Spaces remain open for the Fire Officer II course in North Madison beginning on May 6th. This 10-day course is designed for those fire officers or aspiring officers that need the skills to supervise multiple companies. Generally, this level involves the management of company supervisors involved in the operational aspects of a fire station. Oriented to the level of Captain, topics covered include: group behavior, employee evaluation, communication skills, report preparation, pre-re and operational planning, inspections, command of hazardous materials incidents, safety and emergency service delivery. Completed applications can be mailed or faxed to the Connecticut Fire Academy

Required Textbook: Jones & Bartlett Fire Officer, Principles and Practice, 3rd ed

Training Prerequisite: Fire Officer I

Course Fee: \$350.00 FM Credits: 45 Course # 17215

<http://www.ct.gov/cfpc/cwp/view.asp?Q=574030&A=832>

4. RIT Command & Control – East Haven - May 11th

Spaces remain open for the RIT Command & Control course in East Haven. This course is designed for officers' that will be in a position to take strategic and tactical command at RIT activations on the fire ground. Through classroom lecture and group activities, officers' will gain valuable information on how to manage RIT emergencies while at the same time continuing other fire ground operations. Completed applications can be mailed or faxed to the Connecticut Fire Academy.

Course # 17341

Course Fee: \$40.00

8:30am – 4:30pm

<http://www.ct.gov/cfpc/cwp/view.asp?Q=574030&A=832>

5. CFA June School 2017 - Please Use New One Page Application below

Registration is now open for June School 2017 sponsored by the Connecticut Fire Academy. The annual event will run from June 5th-10th. Classes, unless otherwise noted, will be held on the CFA campus at 34 Perimeter Road in Windsor Locks. **Completed registrations are due by May 26th.**

Applications can be mailed and/or faxed to the following number, 860-654-1889. A separate Flashover permission form is required to be submitted for those registering for the Flashover Survival class. Some classes require full turnout gear and SCBA or other equipment, please read the course descriptions carefully. First time applicants for the Forcible Entry class will receive preference this year. If you have never attended this course, please sign up early!

Any questions regarding the classes or registration please contact Program Manager Jason Decremer at 860-264-9242 or Program Manager Eric Munsell at 860-264-9260.

Brochure <http://www.ct.gov/cfpc/cwp/view.asp?Q=592370&A=833>

PLEASE USE THIS APPLICATION http://www.ct.gov/cfpc/lib/cfpc/june_one_2017.pdf

6. Retirement Dinner Honoring Chief Douglas Jackson

A retirement party will be held on May 1, 2017 for Chief Doug Jackson, East Haven F.D. The event will be held at The Country House 990 Foxon Rd in East Haven beginning at 6:30 p.m. Tickets are \$50 with cash bar, advance ticket purchase only, no tickets will be available at the door. For tickets, call Lisa Mann, EHF D Secretary (203) 468-3221.

7. 12th Annual Ride-4-Justin Benefit Motorcycle Ride - Sunday May 7th 2017

The 12th Annual Ride-4-Justin Benefit Motorcycle Ride will be held on Sunday, May 7, 2017. All proceeds from this event fund the **Justin Wisniewski Firefighters Scholarship Fund Inc.** Please visit our website at: Please see our website, www.Ride4Justin.com for pictures and info.

PLEASE DO NOT REPLY TO THIS EMAIL

Fire Training School Torrington (Burrville State Fire School)

P.O. Box 335
Pleasant Valley, CT 06063

Chairman Tom Osborne
Director Richard T. Winn
Asst. Director John B. Field Jr.

Course Application

Name: _____ Date of Application: _____

Course Name: _____ Course Fee: _____

Student ID: _____

(First 3 Initials of last name and last 4 numbers of social security number)

(Example: Joe Smith; SS# 123-45-6789: ID would be SMI-6789)

Home Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone: (Home) _____ (Work) _____

(Cell) _____ E-Mail: _____

Are you at least 18 Years of Age? Yes No

Firefighter I & II applicants **must** be at least 18 years of age

Applicants Signature

As Chief of the _____ Fire Department, I hereby authorize the above applicant to participate in the Firefighter I or II program and therefore understand that the above named individual will be covered by my department's worker's compensation insurance while participating in such training and that the Burrville State Fire School, its' officers', Instructors', Agents' or Employees' shall not be liable for any injuries sustained during such training. The applicant is considered by my department's standards to be physically and emotionally fit to perform firefighting evolutions without special considerations, and where applicable, to meet the 29 CFR 1910.134 standard for the use of respirators (Self Contained Breathing Apparatus).

Chief's Signature

Date

Purchase Order #

Authorized Billing Signature

***Please include a copy of the medical clearance for Firefighter I and II courses.

(Please complete both sides)

Fire Training School Torrington (Burrville State Fire School)

P.O. Box 335
Pleasant Valley, CT 06063

DOB: _____

Emergency Contact: _____ Phone #: _____

Department Representing: _____

Company/Unit: _____ Town: _____

Circle One: Career Volunteer

Date Entered Fire Service: _____ Rank: _____

Fire Chief's Name: _____ Phone #: _____

Email Address: _____

Training Officer's Name: _____ Phone #: _____

Email Address: _____

Fire Department Mailing Address: _____

I _____ authorize the Burrville State Fire School
to release my training records for the _____ course in which I am enrolled to
_____.

Signed: _____ Dated: _____

(Please complete both sides)

1. TEMPORARY PERMISSION. In consideration for the use of the facility described in this agreement, temporary permission is hereby granted to _____ (the "permittee") to enter and use property and facilities owned and/or controlled by the Town of Fairfield, known as the Fairfield Regional Fire Training Center and located at 205 One Rod Highway, Fairfield for the purpose of conducting Fire and/or rescue Training under the terms and conditions set forth below:

INDEMNIFICATION. The Permittee shall defend, indemnify and hold harmless the Town of Fairfield, its departments, officials, employees, agents, servants, successors, and assigns, irrespective, specifically of their negligence or fault, from and against any and all losses and liabilities, penalties, fines, demands, claims, causes of action, suits, costs and expenses incidental thereto (including cost of defense and attorney's fees), which any or all of them may hereafter incur, be responsible for, or pay as a result of injury, death, disease, or occupational disease to any person, and for damage to or loss of any property, arising out of or in any degree directly or indirectly caused by or resulting from or by reason of the presence of any employees or agents of the permittee being upon the property at the Fairfield Regional Fire training Center and activities of by Permittee, its officers, employees, agents, servants, contractors, subcontractors, or any other person acting for or by permission of Permittee. These obligations shall extend to and include injury, death, disease, or occupational disease to employees of the Permittee, its agents, servants, contractors, subcontractors, or any other person acting for or by permission of the Permittee. The foregoing obligation shall not be limited by the existence of any insurance policy or by any limitation on the amount or type of damages, compensation, or benefits payable by or for Permittee or any contractor or subcontractor.

The undersigned acknowledges that by signing this agreement, he or she has fully read it, understands it and has voluntarily signed it.

Date: _____

By _____
Please print name, sign above and indicate
Position with permittee

**MAY 7TH
2017**

12TH ANNUAL

MOTORCYCLE CHARITY RIDE

RIDE-4-JUSTIN

**ONLINE
REGISTRATION &
PAYMENT NOW
AVAILABLE!**



**NON-RIDERS WELCOME!
ROAST BEEF DINNER
AVAILABLE**

**Free Pin
For All
Participants**

I REFUSE TO TIP-TOE THROUGH LIFE ONLY TO ARRIVE SAFELY AT DEATH – JUSTIN WISNIEWSKI

DATE:	SUNDAY, MAY 7, 2017
PLACE:	ELKS LODGE 1669, MAIN ST. SOUTHINGTON, CT
TIME:	REG. 8 – 10 AM & RIDE LEAVES AT 10:30 AM
REGISTRATION:	RIDER(S): \$25 (INCLUDES A FREE PIN)
(INCLUDES DINNER)	PASSENGER(S) & NON-RIDER(S): \$15
	HIGH SCHOOL STUDENT(S) (WITH ID): \$10

JUSTIN WISNIEWSKI, ENGINE COMPANY 1, SOUTHINGTON, CT, DIED AT A YOUNG AGE, **JUST 18, IN THE LINE OF DUTY**. IN MEMORY OF JUSTIN, THE WISNIEWSKI AND DiPIETRO FAMILY, ALONG WITH SOUTHINGTON FIRE DEPARTMENT COMPANY 1, HAVE ESTABLISHED A SCHOLARSHIP FUND, BENEFITING FAMILIES OF FIREFIGHTERS.

MATT WISNIEWSKI (860) 983-5445
JOE DiPIETRO (860) 983-5021

RIDE4JUSTIN@AOL.COM

WWW.RIDE4JUSTIN.COM

**ANYONE WHO WOULD LIKE TO MAKE A DONATION MAY SEND IT PAYABLE TO:
JUSTIN WISNIEWSKI FIREFIGHTERS SCHOLARSHIP FUND, INC.
P.O. Box 473, SOUTHINGTON, CT 06489**

WWW.RIDE4JUSTIN.COM

MUSIC, FOOD & RAFFLES



Retirement Dinner
Honoring
Chief Douglas Jackson
May 1, 2017

The Country House

990 Foxon Road, East Haven

\$50.00 / Cash Bar

6:30 p.m.

No tickets available at the door.

Purchase tickets in advance only.

Please see Lisa Mann, EHFD Secretary for
tickets or call (203) 468-3221

Cert# 5948

CERTIFICATE OF INSURANCE

DATE (MM/DD/YYYY) 03/14/2007

PRODUCER
Connecticut Interlocal Risk Management Agency
 700 Chapel Street
 New Haven CT 06510

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY A Connecticut Interlocal Risk Mgmt. Agency

COMPANY B

COMPANY C

COMPANY D

COVERAGES

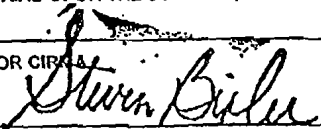
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING AND REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY COMPREHENSIVE FORM <input type="checkbox"/> PREMISES/OPERATIONS <input type="checkbox"/> UNDERGROUND EXPLOSION & COLLAPSE HAZARD <input type="checkbox"/> PRODUCTS/COMPLETE ORDER <input type="checkbox"/> CONTRACTUAL <input type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> PERSONAL INJURY	LAP006220906	07/01/2006	07/01/2007	BODILY INJURY OCC BODILY INJURY AGG PROPERTY DAMAGE OCC PROPERTY DAMAGE AGG BI & PD COMBINED OCC 1,000,000 BI & PD COMBINED AGG 3,000,000 PERSONAL INJURY AGG 1,000,000
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS (Private Pass) <input type="checkbox"/> ALL OWNED AUTOS (Other than Private Passenger) <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY				BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE BODILY INJURY & PROPERTY DAMAGE COMBINED
	<input type="checkbox"/> EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE AGGREGATE
	<input type="checkbox"/> WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				<input type="checkbox"/> WC STATUTORY LIMITS EL EACH ACCIDENT EL DISEASE - POLICY LIMIT EL DISEASE - EA EMPLOYEE
	OTHER				

SAMPLE ONLY

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

evidence of insurance for fire training

<p>CERTIFICATE HOLDER</p> <p>FAIRFIELD TRAINING CENTER ATTN: DENISE SHERWOOD, ADMIN. ASSISTANT 205 ONE ROD HIGHWAY FAIRFIELD CT 06824</p>	<p>CANCELLATION</p> <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.</p> <p>AUTHORIZED REPRESENTATIVE FOR CIRM </p>
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