

Alton Fire & Rescue Department Standard Operating Guidelines (SOG)

SOG 1.3.9 Fire Department Equipment Operators (Reference SOP 1.3.9)

PURPOSE: To insure that each Department member is identified as qualified to operate Department equipment or vehicles and that only authorized members operate said equipment or vehicles.

SCOPE: All Department members.

SPECIFICS: Each Department member who is determined to be qualified to operate each specific piece of equipment or vehicles shall be issued a qualification ID card so stating. Only members qualified may operate apparatus beyond their respective station grounds.

DATE: Approved November 3, 2008

Alton Fire & Rescue Department Standard Operating Procedures (SOP)

SOP 1.3.9 Fire Department Equipment Operators

PURPOSE: To implement the Driver/Operator Qualification ID system.

SCOPE: All Department members.

SPECIFICS: Department members shall be qualified as driver/operators of specific apparatus based on training and experience provided under the direction of an officer, and shall be recommended by the Officer to the Chief of the Department. On recommendation, the Chief at his or her discretion may issue a qualification ID for any or all pieces of apparatus to individual members.

Unauthorized use of equipment or vehicles is subject to disciplinary action at the discretion of the Fire Chief.

ID cards shall be issued, and a log of qualified members shall be maintained. Each member ID card shall be issued with the specific apparatus identified by check mark on card stock as indicated below:



ALTON FIRE / RESCUE DEPARTMENT

55 FRANK GILMAN HIGHWAY
P.O. BOX 875 ALTON, MISSISSIPPI 38609
TEL: (662) 875-0225 FAX: (662) 875-0226
"Protect to Serve - Collaborate to Thrive"

APPARATUS DRIVER/OPERATOR QUALIFICATION

NAME/Rank: _____

Is qualified to operate the following apparatus.

- 1E1; 1E2; 1E4; 1E5; 1L1;
- 1R1; 1A1; 1A2; 1B1; 1F1; 1U1

Other apparatus: _____

Date: _____ by Chief _____

DATE: Approved November 3, 2008

Addenda: Apparatus Qualification Checklist Attestation



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65 FRANK GILMAN HIGHWAY
P.O. BOX 472 ALTON, NEW HAMPSHIRE 03809
TEL: (603) 875-0222 FAX: (603) 875-0226
"Desire to Serve - Committed to Protect"

APPARATUS QUALIFICATION CHECKLIST

ENGINE/PUMPER

Complete this checklist to indicate qualification to operate the specific apparatus described. Each item must be passed in order to qualify. Each item must be attested to by the apparatus officer or an officer of higher rank. All items must be completed.

Apparatus identification: _____

Member Name: _____ NH License (if applicable): _____

Able to safely drive apparatus:

- Includes starting up and shutting down sequence.
- Exiting and entering apparatus quarters.
- Driving in traffic and on open road.
- Operation of emergency lights and warning devices.

Operation of apparatus specific equipment:

(specify – example: light tower)

Able to pump apparatus and discharge water to a designated line or discharge valve using:

- Tank Water
- Water from a dynamic water source (such as a hydrant or source pumper)
- Water from a static water source (such as a pond or dry hydrant).

Passed: _____ By: _____ Signature: _____
DATE Print Name & Rank



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APPARATUS QUALIFICATION CHECKLIST

LADDER (QUINT)

Complete this checklist to indicate qualification to operate the specific apparatus described. Each item must be passed in order to qualify. Each item must be attested to by the apparatus officer or an officer of higher rank. All items must be completed.

Apparatus identification: _____

Member Name: _____ NH License (if applicable): _____

Able to safely drive apparatus:

- Includes starting up and shutting down sequence.
- Exiting and entering apparatus quarters.
- Driving in traffic and on open road.
- Operation of emergency lights and warning devices.

Operation of apparatus specific equipment:
(specify - example: Aerial Ladder)

Able to pump apparatus and discharge water to a designated line or discharge valve using:

- Tank Water
- Water from a dynamic water source (such as a hydrant or source pumper)
- Water from a static water source (such as a pond or dry hydrant).

Able to safely set apparatus and operate aerial ladder

- Able to operate ladder pipe

Passed: _____ By: _____ Signature: _____
DATE Print Name & Rank



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APPARATUS QUALIFICATION CHECKLIST

HEAVY RESCUE

Complete this checklist to indicate qualification to operate the specific apparatus described. Each item must be passed in order to qualify. Each item must be attested to by the apparatus officer or an officer of higher rank. All items must be completed.

Apparatus identification: _____

Member Name: _____ NH License (if applicable): _____

Able to safely drive apparatus:

- Includes starting up and shutting down sequence.
- Exiting and entering apparatus quarters.
- Driving in traffic and on open road.
- Operation of emergency lights and warning devices.

Operation of apparatus specific equipment:

(specify - example: light tower)

Passed: _____ By: _____ Signature: _____
DATE Print Name & Rank



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APPARATUS QUALIFICATION CHECKLIST

AMBULANCE

Complete this checklist to indicate qualification to operate the specific apparatus described. Each item must be passed in order to qualify. Each item must be attested to by the apparatus officer or an officer of higher rank. All items must be completed.

Apparatus identification: _____

Member Name: _____ NH License: _____

Able to safely drive apparatus:

- Includes starting up and shutting down sequence.
- Exiting and entering apparatus quarters.
- Driving in traffic and on open road.
- Operation of emergency lights and warning devices.

Operation of apparatus specific equipment:
(specify)

Passed: _____ By: _____ Signature: _____
DATE Print Name & Rank



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APPARATUS QUALIFICATION CHECKLIST

FIRE BOAT

Complete this checklist to indicate qualification to operate the specific apparatus described. Each item must be passed in order to qualify. Each item must be attested to by the apparatus officer or an officer of higher rank. All items must be completed.

Apparatus identification: _____

Member Name: _____ NH : _____
Driver's License Boating Certificate

Able to safely operate Boat:

- Includes starting up and shutting down sequence.
- Departing dock and Docking Boat.
- Operating Boat following appropriate navigation aids
- Operating Boat in adverse weather conditions
- Operation of emergency lights and warning devices.

Operation of apparatus specific equipment:

(specify: example: GPS, Radar, Depth Recorder)

Passed: _____ By: _____ Signature: _____
DATE Print Name & Rank



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APPARATUS QUALIFICATION CHECKLIST

FORESTRY VEHICLE

Complete this checklist to indicate qualification to operate the specific apparatus described. Each item must be passed in order to qualify. Each item must be attested to by the apparatus officer or an officer of higher rank. All items must be completed.

Apparatus identification: _____

Member Name: _____ NH License (if applicable): _____

Able to safely drive apparatus:

- Includes starting up and shutting down sequence.
- Exiting and entering apparatus quarters.
- Driving in traffic and on open road.
- Operation of emergency lights and warning devices.

Operation of apparatus specific equipment:
(specify - example: Fire Pump)

Passed: _____ By: _____ Signature: _____
DATE Print Name & Rank



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APPARATUS QUALIFICATION CHECKLIST

POLARIS UTILITY

Complete this checklist to indicate qualification to operate the specific apparatus described. Each item must be passed in order to qualify. Each item must be attested to by the apparatus officer or an officer of higher rank. All items must be completed.

Apparatus identification: _____

Member Name: _____ NH License (if applicable): _____

Able to safely drive apparatus:

- Includes starting up and shutting down sequence.
- Exiting and entering apparatus quarters.
- Driving onto and off from trailer.
- Driving in adverse terrain.
- Operation of emergency lights and warning devices.

Operation of apparatus specific equipment:

(specify - example: Rescue Skid, Forestry Pump Skid)

Passed: _____ By: _____ Signature: _____
DATE Print Name & Rank