



Northwest Arctic Borough

Fire Department

* Ambler * Buckland * Deering * Kiana *

* Kivalina * Kobuk * Noatak * Noorvik * Selawik * Shungnak *



Quarterly Report Form

Village:	DATE:
Submitted By:	Quarter:
Name & Title	<ol style="list-style-type: none"> 1. July 1 – September 30 2. October 1 – December 31 3. January 1 – March 31 4. April 1 – June 30
Sign	DATE

Fax or email form to: Hans B. Nelson, Fire Safety Coordinator / Email: hnelson@nwabor.org fax: (907) 442-2930

Fires:	<input type="checkbox"/> No fires during this reporting period. OR _____ fires occurred during this reporting period. MUST INCLUDE INCIDENT REPORT. Short description of the fire(s):				
Training Activities	Pre-planning and 360°	Rolling Method of Fire Hoses	Trailer Set-Up & Equipment	Fire Extinguisher Maintenance	PPE & Equipment Assessment
Monthly Meetings	New Business	Community Concerns	Volunteer Firefighter Concerns	ICS 100/200 Refresher	Meeting Date
Fire Prevention and Education	School Site Visits -- Dates and Topic	Smoke Alarms Community Outreach	Class ABC Fire Extinguishers Outreach	Radio Announcements	Other
False Alarms:	<input type="checkbox"/> No false alarms were recorded during this reporting period. _____ of false alarms reported, Fire Incident Reports done, short description of the false alarms:				