



BERKS COUNTY FIRE TRAINING CENTER SITE USAGE REQUEST FORM

revised 6/23 / N Fire Training Site Usage Request Forms

Training Date and Times Requested:

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| TO |
|----|

Other agency(s) Attending:

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| |

Point of Contact:

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|------------------|
| Name: |
| Agency: |
| Phone (daytime): |

Please provide a description of the equipment, services, and training to be performed on site including the expected number of attendees:

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SITE RESERVATION REQUESTS

| Building Sites | | |
|-------------------------|--|----------------------------|
| REQUESTED | | "New" Burn Building (A) |
| REQUESTED | | "Old" Burn Building (B) |
| REQUESTED | | Drill Tower |
| EXPECTED # OF ATTENDEES | | Classroom |
| Confined Spaces | | |
| REQUESTED | | Confined Spaces (Manholes) |
| REQUESTED | | Confined Spaces (Tanks) |
| Flammable Liquids Pits | | |
| REQUESTED | | L-Pit |
| REQUESTED | | Round Pit |
| REQUESTED | | Propane Evolutionary Pit |
| Other Locations | | |
| REQUESTED | | Fire Extinguisher Pit |
| REQUESTED | | Roof Simulator |
| REQUESTED | | General Grounds Usage |
| REQUESTED | | Drafting Pit |

| | | |
|---|--|--------------------------------|
| REQUESTED | | Fire Extinguisher (2.5 P/W) |
| REQUESTED | | Fire Extinguisher (2.5 AFFF) |
| REQUESTED | | Fire Extinguisher (10# BC) |
| REQUESTED | | Fire Extinguisher (10# ABC) |
| REQUESTED | | Fire Extinguisher (10-15# CO2) |
| REQUESTED | | Flares |
| REQUESTED | | Flammable Liquids Pit Analysis |
| REQUESTED | | Fuel Oil |
| REQUESTED | | Smoke Machine (Includes 1 qt.) |
| (PER QT) | | Additional Liquid Smoke |
| (PER SHEET) | | Plywood |
| REQUESTED | | Propane |
| REQUESTED | | Forcible Entry Prop |
| REQUESTED | | Excelsior |
| REQUESTED | | Door/Window Dowels |
| OTHER | | |
| Please specify items and applicable amounts | | |



Berks County Fire Training Center

895 Morgantown Road ♦ Reading, Pennsylvania 19607

INSTRUCTIONS FOR COMPLETION

1. Training Dates and Times Requested: Provide the date (MM/DD/YYYY) and both the starting and anticipated ending time of the usage request.
2. Point of Contact Name: Please provide the primary person's point of contact requesting site usage.
3. Point of Contact Agency: Please provide the primary person's point of contact's agency requesting site usage.
4. Point of Contact Phone: Please provide the primary person's point of contact telephone number.
5. Description: Please provide a brief description of the equipment, services, and training that will be performed on site and an expected number of attendees. It is not necessary to include information if this information will be supplied in a burn plan.

PAGE 2

Please indicate all buildings that will be needed for training. Reservations are made on a first come, first served basis (with burn plan approval, if applicable).

Please indicate all training props that will be needed for training including classrooms. Reservations are made on a first come, first served basis (with burn plan approval, if applicable).