**ADDITIONAL EQUIPMENT for CHIEF’S CERTIFICATION**

**NOTE: This is not valid unless attached to DNRC Chief’s Certification for LGFF Form**

**and is applicable for the following positions only: ENOP, ENGB, FFT1, FFT2 and WTOP.**

The equipment listed herein meets all the minimum legal requirements for use and operation of the equipment type identified.

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| **Equipment Type** | **Engine/Truck No.** | **License No.** | **Serial No.** |
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I certify that the above listed equipment meets the minimum resource typing standards under NRCG Mobilization of Local Government Firefighting Resources, that personnel listed meet the requirements of National Incident Management System: Wildland Fire Qualification System Guide PMS 310-1 or have the knowledge, skills, and ability requirements to perform the position(s) listed, and that operators possess a commercial driver’s license (CDL) or have the knowledge, skills and abilities to operate the type and class of equipment listed above, as referenced in the NRCG Mobilization of Local Government Firefighting Resources. I also certify that all personnel are rostered members of a department. I also agree that the hiring entity may inspect the listed equipment and the appropriate training records. I hereby certify that I am authorized to sign this Chief’s Certification for Local Government Fire Forces Equipment and Operators.

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| **Witness Signature:** | **Fire Chief Signature:** | |
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| **Name and Title (Printed):** | **Fire Chief Name (Printed):** | |
|  |  | |
| **Date:** | **Date:** | **FDID No.** |