



**PETERBOROUGH FIRE SERVICES**  
210 Sherbrooke Street, Peterborough K9J 2N3  
Fax: (705) 745-2460 Phone: (705)745-3281  
**RETURN COMPLETED APPLICATION FORM TO:**  
Amanda Nichols, Public Educator,  
Email: [alnichols@peterborough.ca](mailto:alnichols@peterborough.ca)

## PUMPER TRUCK REQUEST FORM

Applicant Information (Please Print Clearly)

Full Name: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
Street Address Organization

\_\_\_\_\_ City Postal Code

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Event Name/Info: \_\_\_\_\_

## Request Information

*Please be advised once this request has been confirmed, a pumper truck and firefighters will be scheduled to visit the event/location at the time and location requested below. The scheduled truck and crew will be "on duty" and may be required to leave suddenly and/or be delayed arriving to the event/location if required. The Officer on duty will attempt to contact the applicant in the event of any delays for the truck.*

Date Pumper Requested: \_\_\_\_\_

Time Requested Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Address/Location: \_\_\_\_\_

Audience Information: Age Group: \_\_\_\_\_ Approximate # of Attendees: \_\_\_\_\_

|                                 |  |   |
|---------------------------------|--|---|
| <input type="checkbox"/> Camp   | <input type="checkbox"/> Charity Event | <input type="checkbox"/> School/Daycare |
| <input type="checkbox"/> Adults | <input type="checkbox"/> Fundraiser    | <input type="checkbox"/> Sports         |
| <input type="checkbox"/> Other  |  |   |

Additional Information/Special Instructions for Pumper: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Application: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

## FIRE DEPARTMENT USE ONLY

Date Application Received: \_\_\_\_\_

Request Approved: \_\_\_\_\_ Signature: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_