



**NYS Division of Homeland Security and  
Emergency Services  
Office of Fire Prevention and Control**

**Volunteer Firefighter Inquiry Form**  
Westchester County Agencies

OFPC USE ONLY	Date/Time Stamp
NYSPIN #	

**\*NOTE: ALL FIELDS IN SECTIONS 1 & 2 MUST BE COMPLETED**

**PLEASE TYPE OR PRINT NEATLY WITH BLACK INK**

**FAX completed form directly to OFPC Arson Bureau @ (518) 242-3746**

**Section 1: Fire Department Information**

Name: Bedford Fire Department	Date:	
Street Address: 34 Village Green		
Post Office: Bedford	State: NY	Zip: 10506
Daytime Phone Number: (914) 234-3133	Fax Number: (914) 234-0625	
<b>PRINT</b> Name of Requesting Chief Officer:		
Signature:	Title:	

**Section 2: Applicant Information**

Last Name:	First:	MI:
Street Address:		
Post Office:	State:	Zip:
Nickname:	Sex: Male Female	Height: ___ Ft. ___ In.
Race/Apperance:	White Black Am. Indian Asian Hispanic Other	
DOB: / /	Age:	Social Security Number:

INVESTIGATING OFPC OFFICER:		DATE:
INVESTIGATING OFPC OFFICER SIGNATURE:		
RESULTS OF INQUIRY	<input type="checkbox"/>	No Record of Arson Conviction; and No Record of Conviction Requiring Registration as a Sex Offender <b>PROCEED WITH APPLICATION PROCESS</b>
	<input type="checkbox"/>	Arson Conviction Found <b>APPLICANT MAY NOT JOIN VOLUNTEER FIRE DEPT.</b>
	<input type="checkbox"/>	Convicted of a Crime Requiring Registration as a Sex Offender; <b>Fire Company shall refer to Correction Law §§752 and 753 to determine eligibility.</b> <b>Fire Company contact the Sex Offender Registry at 800-262-3257 to learn more.</b>
	<input type="checkbox"/>	Arson and/or registerable sex offense case is pending adjudication <b>APPLICANT / TRANSFEREE APPROVAL MUST BE DELAYED</b>