

Oneida County Emergency Services

Fire Chief's Contact Information

Fire Department: _____

Headquarters Address: _____

Mailing Address: _____

Department Business Phone: _____ FAX #: _____

Department Email: _____

Department Website: _____

PLEASE PRINT:

Chief: _____

Phone: Home: _____ Work: _____

Cell: _____

Email: _____

Dept/Asst Chief: _____

Phone: Home: _____ Work: _____

Cell: _____

Email: _____

2nd Asst Chief: _____

Phone: Home: _____ Work: _____

Cell: _____

Email: _____

3rd Asst Chief: _____

Phone: Home: _____ Work: _____

Cell: _____

Email: _____

EMS Contact: _____

Phone: Home: _____ Work: _____

Cell: _____

Email: _____

When do Chief Officers take office? _____ Length of Terms? _____

Does your agency utilize electronic Records Management System: ____: Yes ____: No

If yes, what system does your agency utilize? (Firehouse, NYS, Red Alert etc.) _____

When is your monthly meeting held? _____

Please email this form to: memonahan@oneidacountyny.gov