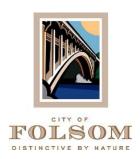


FOLSOM FIRE DEPARTMENT

535 Glenn Drive Folsom, CA 95630 Office (916) 461-6300 Fax (916) 984-7081 <u>www.folsom.ca.us</u>



FIRE SAFETY OFFICER SERVICE AGREEMENT

APPLI	CANT:		
TAX II	D/SS#:		
ADDR1	ESS:		
TELEP	PHONE:		
			Municipal Code Chapter 8.36 (Folsom Services at the following event/activity:
Date(s)) Start Time	Finish Time	Total Hours
LOCAT	ΠΟΝ OF EVENT:		
ГҮРЕ (OF EVENT:		
		nish, and Applicant hereby agrees t he following terms and conditions:	o accept and pay for, the requisite Fire
1.	The event/activity will requite to be provided at an hourly		service by Fire Safety Officer(s),
2. In the event additional hours of Fire Safety Officer services are required by the length and/or nature of the event/activity, such additional services shall be provided by the Fire Department at the same hourly rate(s) as aforesaid;			
3.	3. The Folsom Fire Department shall bill by invoice for the aforesaid services by invoice;		
4.	The Applicant shall remit th	ne full sum due and owing within th	airty (30) days of the date of the invoice.
Signatı	ure of Applicant (If authorized	representative, give title)	Date
Signatı	ure of Fire Department Repr	esentative (include title)	Date