



Name of person(s) submitted for award:

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Department:

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Other persons working on Project:

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Department Fire Prevention Officer:

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Person submitting  
application \_\_\_\_\_

\*\*\*Endorsements: (Minimum of three)

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
5 \_\_\_\_\_

\*\*\* (endorsements = recommendations by persons familiar with project)

Comments:



## **Lt. Michael Neuner Fire Prevention/Safety Award Application**

Please forward completed applications to Deputy Emergency Services Coordinator Ken Clair at Bureau of Emergency Services, 112 Old Route 6, Carmel, New York 10512. Applications should be submitted by September, 25<sup>th</sup> each year.

(Applications may be faxed to 845-808-4010 \_ Attention: Ken Clair)

