



Cowlitz County Fire District #5

P.O. Box 280
Kalama, WA 98625
(360) 673-2222 Fax (360) 673-3389

Volunteer Firefighter Application Packet

Cowlitz County Fire District #5 is a combination fire and emergency medical services department operating out of three stations and covering the Kalama area including Industrial and rural areas surrounding Kalama. A three member Board of Commissioners oversees the District. Currently, the District has eight full time employees: Fire Chief, 3 Paramedics, 3 Firefighter-EMT's, 1 District Secretary and 1 part time Administrative Assistant.

The District shares a boundary with Cowlitz 2 Fire and Rescue on the North, Cowlitz District #1 on the South and East and the West boundary is the Columbia River.

We respond to mitigate over 800 emergency incidents annually in a 56 square mile area and serve a population of just over 5,300 residents with a large industrial community. All prospective volunteers are required to live within 15 minutes of one of our three stations.

Our district provides fire control and prevention services, public education, emergency medical services, vehicular rescue, marine fire control and rescue, technical low to high angle rope rescue and confined space rescue.

Our fire and EMS operations are entirely self sufficient through tax revenues and user fees and operate without special levies or bond issues.

We currently operate three class 1 fire engines, one medium rescue, two tenders, two advanced life support ambulances, two brush engines, one technical rescue trailer, a foam trailer, one fire boat, one support vehicle, and two command units. Fire personnel are trained at either the Washington State Firefighter I or equivalent level.

CCFD #5 is always looking for new members. It costs approximately \$3,000 to completely outfit a new firefighter. It also takes a great deal of training and effort to bring a new recruit up to a level where they can safely engage in emergency response operations. We provide all the equipment and training you need. You have to supply the strength, desire and commitment it takes to make a difference in your community....

by becoming a Cowlitz County Fire District # 5 Volunteer firefighter.

If you are at least 18 years old with a High School Diploma or equivalent, have lived in our district for 1 year and are willing to serve your community, **WE WANT YOU!**

BENEFITS

The following is an overview of the benefits available to the volunteer firefighter. Detailed information may be obtained from the District Office.

INCENTIVE PAY PLAN

Under Federal Law, volunteer firefighters are not considered employees of the District even though certain benefits are provided. The District does provide a nominal stipend for drills and calls. The standard stipend per call or drill is 1 point, equaling \$ 4.00.

Definitions of a "Call" or "Drill" include fire and medical emergency responses, departmental training sessions, officers meetings and Wednesday night business meetings.

All proceeds will be considered as income and taxed accordingly.

In the event you are unable to attend a scheduled training session, you must make arrangements to make-up the training you missed.

VOLUNTEER FIREFIGHTERS' RELIEF AND PENSION FUND

The Washington State Board for Volunteer Fire Fighters provides for its members, line of duty medical, disability and death benefits as well as a pension plan. The medical, disability and death benefit premiums are fully paid by the District. The pension plan cost is \$30.00 per year to the member and \$30.00 per year to the District.

An overview of the medical, disability and death benefits include \$152,000.00 death benefit, \$2,000.00 funeral benefit and up to \$2,891.98 in survivor benefits. Medical benefits are paid according to the Labor and Industries fee schedule. Disability compensation is paid at a maximum rate of \$96.39 per day or \$2,891.98 per month for the first 6 months and if fully disabled after 6 months, \$1,445.98 per month plus spouse and children benefits to a maximum of \$2,891.98 per month.

A member is vested in the pension plan after ten years of service and one payment into the pension plan. The amount of the pension vested increases for each five years of service beyond the minimum ten years and for each pension payment made. The maximum pension is vested with twenty-five years of service and twenty five payments into the pension fund. Upon retirement, there are several payment options depending on age of retirement, years of service and payments and survivor options.

If a member leaves the fire service without vesting a pension or decides to not accept his/her vested pension, the fees that he/she has paid into the plan may be refunded.

WASHINGTON STATE FIREFIGHTERS' SPOUSE AND ORPHAN'S FUND

The object of this Association is to provide a fund for the relief of spouses and orphans of deceased firefighters. The maximum benefit paid upon death of a member is \$1,750.00. A firefighter may become a member of this fund if, at the time of application, he/she is not over the age of 45 and is in good health.

The fees for an active member are fully paid by the District. A member may continue his/her membership in this fund when active duty ceases provided said member has had five years of service immediately preceding the date of retirement and has been a member and contributor to the fund or not less than five years. The former firefighter shall be responsible for the premium payment.

VFIS TRUST INSURANCE

The District provides an additional line of duty accident and sickness insurance policy. The premiums for this policy are fully paid by the District. This policy provides a maximum benefit of \$50,000.00 for accidental death, dismemberment, loss of sight, of hearing, permanent physical impairment, disfigurement from burns and numerous specified conditions. Medical expenses are provided for a maximum of \$15,000.00 per incident. Disability benefits are paid to a maximum of \$600.00 per week. Detailed information on fee schedules and conditions is available from the District office.

VFIS LIFE INSURANCE

The District provides Life Insurance through VFIS as another benefit to you and your family. This includes \$25,000 Basic Life, \$50,000 Accidental & \$75,000 Accidental Line of Duty.

WASHINGTON STATE FIREFIGHTERS' ASSN. AD & D INSURANCE

The Washington State Fire Fighters Association provides for its members an accidental death and dismemberment policy which covers the firefighter, spouse and children. The insured are covered both on and off duty. The policy provides maximum benefits of \$1,100.00 for the policy holder, \$500.00 for a spouse and \$250.00 for each dependent child. In order to qualify for the policy, the firefighter's name and home address must be submitted to the Association. A release of address authorization must be given to the District office. Contact the District office for more information.

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Volunteer Firefighter Application

Instructions: Type or legibly print this application using Black Ink only. Application, Driving Record and Criminal History form should be returned to the District office at 382 NE Frontage Rd. Kalama, WA. 98625

General Information				
Last Name		First Name		Middle
Street Address			City	St. Zip
How long have you lived at this address?				
Home Phone		Work Phone		Cell
()		()		()
Are you legally eligible for employment in the United States? Yes ___ No ___				
Are you over the age of 18? Yes ___ No ___				
Upon the request of Cowlitz County Fire District #5, I will agree to a physical and drug screen that will be paid for by the Fire District and at no cost to me. Yes ___ No ___				
Education				
High School Name			Address	
Did you graduate? Yes ___ No ___ (Please supply a copy of your diploma)				
If you have a GED, please supply a copy of the certificate				
College			Address	
Did you receive a degree? Yes ___ No ___				
Other education , license or certifications: _____				

Employment History

Current Employer

Phone Number

()

Date of employment

Work Schedule

Specific Duties

Previous Employer

Phone Number

()

Length of employment

Reason for leaving

Specific Duties

May we contact your current and past employers? Yes ___ No ___

Personal References

(Not former employers or relatives)

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

May we contact your references? Yes ___ No ___

May we call you at home to follow up on this application? Yes ___ No ___

May we call you at work to follow up on this application? Yes ___ No ___

I hereby certify, under the penalty of perjury in the State of Washington, that this application contains no willful misrepresentation and that the above information given is true and complete to the best of my knowledge.

Signature _____ Date ___/___/___

For Department use only

Date applicant interviewed ___/___/___ By: _____

Accepted as Volunteer Firefighter for CCFD #5 Yes ___ No ___

Fire Chief _____ Date ___/___/___