

## Office of Louisiana State Fire Marshal

Code Enforcement and Building Safety

Department of Public Safety and Corrections Public Safety Services



## Statement and Affidavit of Registration for the Louisiana Fire Department Online Registry

Date:	
I (Print Name)	, being the fire chief of
(Department Name)	, FDID #
in the Parish of	
administrator for my department's or responsible for the upkeep of my pertaining to contact and address, puto the best of my ability. As fire administrator at any time by notify submission of a new Statement and a Online Registry form	e Fire Marshal approve the appointee cited below as the inline registry account. I understand that as the chief I amy department volunteer roster along with information ersonnel characteristics and apparatus of my department e chief I may remove and reappoint our department ring the Louisiana Office of State Fire Marshal with the Affidavit of Registration for the Louisiana Fire Department be the department administrator for the Louisiana Fire
	, Title
(Fire Chief's Signature)	
(Cell Phone Number)	
(Email Address)	
OSFM, Approval by:	