



MEMBERSHIP APPLICATION

BOROUGH OF MOUNTAIN SIDE
FIRE DEPARTMENT
210 NEW PROVIDENCE RD
MOUNTAIN SIDE, NJ 07092



Date: _____

Last Name: _____ MI: _____ First Name: _____

Current Address: _____

Town: _____ State: _____ Zip Code: _____

Number of years at this address: _____ Home Phone: () _____ - _____ Cell: () _____ - _____

E-mail Address: _____

Previous Address: _____

Number of years at previous address: _____

Date of Birth: _____ Place of Birth: _____

Social Security Number: _____ - _____ - _____

Driver's License Number: _____ State Issued: _____

Current Occupation: _____

Employer: _____

Employer's Address: _____

Were you ever a member of another Fire Department? If yes, where? _____

Check off certifications currently held and provide expiration date if applicable:

NJ Firefighter I _____ NJ Firefighter II _____

CPR _____ NJ EMT _____

Please list any other Fire Department related training: _____

Signature of Applicant: _____

Date: _____

MOUNTAIN SIDE FIRE DEPT OFFICIAL USE:

Date of Company Meeting Attended: _____ Officer's Initials: _____

Date of Drill Attended: _____ Officer's Initials: _____

Date of Work Period Attended: _____ Officer's Initials: _____

Date of Membership Meeting: _____ Approved: _____ Denied: _____

Relief Application Issued: _____ Returned by Applicant: _____

Date Approved by Boro Council: _____ Approved by NJSFA: _____ Line # _____

Badge # _____ Key Issued _____ Pager Issued _____ Serial # _____