



ARKANSAS DEPARTMENT OF AGRICULTURE FORESTRY DIVISION

Arkansas FEPP and FFP Equipment Request Form

*The current fire chief must have a signed cooperative agreement on file before equipment requests will be honored. Please make sure all information is accurate and legible.

Fire Department Name: _____ County: _____

Mailing Address: _____

Physical Address: _____

Please choose one type of equipment per request.

Tanker How many gallons will this haul? _____ Bay Door Height: _____
Additional Information: _____

Brush Truck Size Range: _____ Drive Type: _____
How many gallons will this haul? _____
Additional Information: _____

Service Truck Size Range: _____ Drive type: _____
Additional Information: _____

Pumper How many gallons? _____ GPM _____
Additional Information _____

Generator Size Range: _____ Skid or trailer mount? _____

Tires Size: _____ Qty: _____

Other Please be as descriptive as possible: _____

Do you anticipate Forestry completing any of the following:

Paint: Red White Yellow (note: we do not offer painting of generators)

Lettering: _____

Siren/speaker Light Bar Skid Unit or Pump/Engine: _____

Is an interest free loan anticipated? Yes No

***Required:** What will be the primary use of this equipment? _____

Fire Chief Sign: _____ Date: _____

Fire Chief Print: _____ Phone #: _____

Rev. 10/29/2019