



**Rogers Fire Department  
Minimum Company Standards  
Automatic Aid Supplement  
3rd Quarter 2017**



*The following Minimum Company Standard competencies are to be completed by Rogers Fire Department companies in cooperation with our automatic aid partners. Specifically, these competencies are to be completed with the on-duty fire personnel of the Lowell Fire Department. It is the responsibility of the company officers at both Station 2 and Station 7 to coordinate with each other and the corresponding Lowell Fire Department personnel to establish a mutually agreed upon place and time to complete these competencies while keeping in mind the need to provide adequate fire coverage to both cities.*

Date Initiated: \_\_\_/\_\_\_/2017    Shift: \_\_\_\_\_    Station: \_\_\_\_\_    Company Officer: \_\_\_\_\_

Minimum Company Standard Competency	Time	DATE	Company Officer Initials	Automatic Aid Officer Initials
<i>FIREFIGHTER SAFETY AND SURVIVAL</i>				
Review and discuss SOP 507 Rapid Intervention and Survival				
Review and discuss Mayday and Rapid Intervention Policy for Automatic Aid Dept.				
<i>FIRE SUPPRESSION TRAINING</i>				
Review and discuss SOP 502 Search and Rescue				
Review and discuss Search and rescue procedures including the use of VEIS				
Review and discuss SOP 508 Ventilation				
Review and discuss flow path management procedures				
<i>1410 Evolution</i>				
Forward Lay from Hydrant to Engine and flow blitz fire nozzles and a hand line				
<i>Building Tours</i>				
Tour new apartment complex on 26 <sup>th</sup> street behind Academy Sports				

The undersigned confirms that the above fire company has received training in the skills and knowledge and proficiently demonstrated all competencies to the standards established by the Rogers Fire Department. The signatures below certify the fire company has successfully completed all applicable requirements of the minimum company standards within the established time frame and standard.

_____ Company Officer Signature	___/___/___	_____ Automatic Aid Officer Signature	___/___/___ Date
_____ Fire Chief Signature	___/___/___ Date	_____ Battalion Chief Signature	___/___/___ Date