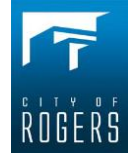




**Rogers Fire Department
Minimum Company Standards
Automatic Aid Supplement
3rd Quarter 2018**



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: ____/____/ 2018 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 409 Standing Fire ground orders | | | | |
| Review and discuss Standing Orders for Automatic Aid Dept. | | | | |
| Familiarize hose loads for both departments | | | | |
| <i>1410 Evolution</i> | | | | |
| Forward lay from a hydrant to an attack engine and deploy a garden lay | | | | |
| <i>Building Tour</i> | | | | |
| Contact mutual aid department and coordinate a tour in an adjoining FMA | | | | |
| | | | | |

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

Captain Training Division

____/____/____
Date

Battalion Chief Signature

____/____/____
Date