

## **Buffalo-Mt. Pisgah Fire Department Membership Information**

As a volunteer firefighter, you can expect to spend some time away from home serving your community.

### **Meetings:**

We have two meetings a month

1<sup>st</sup> Monday at 7PM is our Business Meeting, where we discuss the latest issues with the fire department and make decisions regarding various issues.

3<sup>rd</sup> Monday at 7PM is our Training Meeting, where we participate in various different training drills. We also may have special training at other fire departments throughout the year.

### **Training outside of the department:**

Also there is a mandatory 90 hour class entitled "Fundamentals of Firefighting" that will be required to be taken to begin becoming a certified firefighter. This training will give you the basics on how to fight a house fire, rescue victims, use ladders, etc. This class is offered at neighboring fire departments in the area. The classes are taught at night and on the weekends to accommodate work schedules. Other classes will be required before entering a burning structure.

We also encourage and expect our members to take a number of other Fire Academy classes regarding Emergency Vehicle Operations, Pumper Operations, Incident Command, HazMat Operations, Auto Extrication as they are available in the area. Those interested can also take Medical First Responder training when available.

### **Calls for service:**

Calls can happen at any time. Normally we run an average of 25-30 calls a month. We respond to a number of different incidents including: house fires, car fires, woods fires, vehicle wrecks, fire alarms, smoke in the area calls, medical calls, etc. Medical First Responder calls are the majority of our calls.

### **Station clean-up and work details:**

Members are tasked with various duties each month such as cleaning the station, cutting the grass, testing hose and equipment, and washing the fire trucks. Also the Chief may schedule a special work detail for members to get together to do special clean-ups for events.

### **Special duties/events:**

We do a number of special duties and attend events at schools, churches, etc. We talk with Children and Adults about fire safety and hand out promotional literature. We also participate in parades and other functions.

### **Fundraisers:**

We do a number of fundraisers throughout the year and member participation is critical in the success of these fundraisers.

## **Benefits of Joining our department**

- Satisfaction of helping your neighbors
- Uniforms, T-shirts, Hats, Jackets, etc. supplied by fire department
- Fire gear, radios etc. supplied by fire department
- Free training
- Free Annual Physical including cardiac stress test and blood work
- Awards for service and training
- Christmas Banquet
- Reimbursement checks from county for calls and training meetings attended
- Preparation for a career in Firefighting/Medical fields

## New Member Policy updated 8-23-15

Any new applicant of the Buffalo-Mt. Pisgah Fire Department will be required to complete our membership application, the SLED Criminal Records Check form, and the Firefighter Registration Form. Upon receiving the results of the SLED Criminal Records Check form, if the results are satisfactory as deemed by SC Law (See Below), the applicant will be interviewed by the officers of the department. After the interview and with the officer's approval, the applicant will be voted on by the membership at the next business meeting. If the applicant receives a majority vote, the applicant will be considered a probationary member. If the applicant does not receive a majority vote, the forms will be filed for our records but the member will have to reapply in 12 months.

Probationary Members will be required to complete all initial paperwork upon employment before any equipment is issued. Probationary Members will be under a 6 month probation period at which time they will train on items such as BUT NOT LIMITED TO: S.C.B.A's, nozzle practices, hose practices, pump operations, safe driving practices, and proper donning of protective clothing. Probationary members should enroll and complete any fire academy classes deemed necessary by the Chief or Training Officer. Probationary Members will not be allowed to drive any apparatus at all except during training on apparatus conducted by an officer of the department. They will be allowed to respond to calls and assist where necessary as deemed by the Incident Commander. Probationary members will not be allowed to operate their private owned vehicle (POV) as an emergency vehicle.

After the end of the 6 month probationary period and the completion of all required training objectives, the member will be again voted on by the membership present at the business meeting following the end of the 6 month period. If the probationary member receives a majority vote, he/she becomes a regular member with all benefits. If the applicant does not receive a majority vote, the member will have to reapply after a 12-month period.

**SECTION 40-80-20.** Criminal records check required for employment.

(A) Prior to employment of any firefighter, paid or volunteer, the fire chief or other employer must ensure that each prospective firefighter undergoes a criminal records check conducted by a law enforcement agency.

(B) The cost of the criminal records check must not exceed eight dollars.

**(C) A person who is convicted, pleads guilty or no contest, or otherwise admits guilt, regardless of adjudication, to a felony, arson related crime, use of an illegal substance, or abuse of a controlled substance within the last ten years, shall not be allowed to perform firefighting duties in the State of South Carolina on or after July 1, 2001. After the expiration of the ten-year period, a fire chief has the option and discretion to determine whether or not to hire a person with a criminal record as a firefighter.**

(D) A criminal records check is not required for a firefighter employed on or before June 30, 2001

*Buffalo-Mt. Pisgah Fire Department*

5203 Mt. Pisgah Road  
Kershaw, SC 29067  
803-475-3711  
www.bmfire.com

**Membership Application**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: SC Zip: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
(If age is less than 18 years old also fill out Junior Firefighter/Explorer Application)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Place of employment: \_\_\_\_\_ Shift/Schedule: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ Class: \_\_\_\_\_

Do you have any experience with a Fire Department? If yes include name of dept, chief, contact numbers, and **attach training certificates to this application.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a criminal record? Include traffic offenses also.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any medical problems that would prevent you from engaging in Firefighting activities? Include any heart and back problems, major surgeries, claustrophobia, etc. (free physical will be required within one year)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If available do you agree to take the South Carolina Fire Academy Basic Structural Firefighter and other required training courses in the next year? Yes or No (please circle)

**By signing below, I agree that the above information is correct to the best of my knowledge.**

Sign: \_\_\_\_\_  
Date: \_\_\_\_\_

Also fill out SLED Records Check form and SC Firefighter Registration Form. Application will not be processed without them.

Department Use Only:  
Date Received: \_\_\_\_\_  
Date Voted on: \_\_\_\_\_ Results: Yes \_\_\_\_\_ No \_\_\_\_\_  
Probationary Period ends: \_\_\_\_\_



South Carolina  
Department of Labor, Licensing and Regulation



Division of Fire and Life Safety

141 Monticello Trail  
Columbia, SC 29203  
(803) 896-9800  
FAX: (803) 896-9806 (Fire Marshal)  
FAX: (803) 896-9856 (Fire Academy)  
www.llr.state.sc.us

Mark Sanford  
Governor  
Adrienne Riggins Youmans  
Director

**Firefighter Registration  
Named Based Criminal Records Check Request**

*Note: This named-based criminal records check request should only be completed on those being hired, and not used as a screening tool. Accountability for these requests will be based on Firefighter Registration Records.*

**Please complete this form either by typing or printing legibly.**

**Date of Request:** \_\_\_\_\_

**Requesting a Background Check on:**

**Name:** \_\_\_\_\_  
                    **First Name**                    **Middle Name**                    **Last Name**

**AKA and/or Maiden Names:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Gender** \_\_\_\_\_

**SSN:** \_\_\_\_\_

**Requested by:**

**Person Requesting:** \_\_\_\_\_

**Department Requesting:** \_\_\_\_\_

**Department FDID#:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Please furnish an e-mail address (if one is available) as the response will be returned via E-mail.**

**E-mail Address:** \_\_\_\_\_

*Note: Any missing information may mean that a background cannot be completed.*

**South Carolina Firefighter Registration Form**  
**South Carolina State Fire Marshal's Office**  
**141 Monticello Trail**  
**Columbia, South Carolina 29203**

**A.** Name: \_\_\_\_\_  
Last First Middle

Home Address \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Class D/L: (Circle One) A B C D E F M G

Name of Employing Fire Department: Buffalo-Mt. Pisgah / Kershaw County Fire

Fire Department Mailing Address: 515 Walnut Street

City: Camden Zip Code: 29020 FDID #: 28204

Telephone Number: ( 803 )- 425 - 1522 Status: \_\_\_\_\_ Paid       Volunteer

Background Check Completed       Employed Prior to July 1, 2001  
Date: \_\_\_\_\_      Employment Date: \_\_\_\_\_  
(Necessary if Employed On or After July 1, 2001)

By Signature I certify that the above named individual is eligible for registration under the provisions of Title 40, Chapter 80, South Carolina Code of Laws.

\_\_\_\_\_  
Fire Chief (Print Name)      Date

\_\_\_\_\_  
Fire Chief (Signature)      Date

**B.** **ACTION TAKEN**  
(For All Actions Taken On or After July 1, 2001)

Please Check

<input type="checkbox"/> Employment Date (See Section 40-80-10.B.2) <input type="checkbox"/> Termination <input type="checkbox"/> Voluntary Separation <input type="checkbox"/> Retirement <input type="checkbox"/> Inactive <input type="checkbox"/> Member of Multiple Departments – List: _____ <input type="checkbox"/> Other (Explain) _____	Effective Date: _____ Effective Date: _____ Effective Date: _____ Effective Date: _____ Effective Date: _____
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**C.** **Do Not Write Below This Line**  
(For SCFM Use Only)

The named individual \_\_\_\_\_ is

Registered as a firefighter in the State of South Carolina

Registration Number: \_\_\_\_\_ Date: \_\_\_\_\_

Denied registration based on: \_\_\_\_\_

\_\_\_\_\_