

South Old Bridge Volunteer Fire Company, Inc.

PO Box 426 Old Bridge, NJ 08857-0426

732-251-8596

Engine Company #1
958 Englishtown Rd

Engine Company #2
14 Throckmorton Ln

Engine Company #3
1599 Englishtown Rd

Dear Applicant:

Thank you for your interest in joining the South Old Bridge Volunteer Fire Company. To apply for membership, you must fill out the attached forms completely and return them at your convenience.

Below is a list of the forms along with instructions on how to fill them out, as well as what you need to attach before submitting for review by the Screening Committee.

A. Application Form

1. The application **must** be completely filled out. If any item on the application does not apply to you, please indicate by putting "N/A" where appropriate.
2. Once the application form is filled out, it **must** be notarized by a Notary Public.
3. Attach a copy of your Birth Certificate or Naturalization papers (if applicable)
4. Attach a copy of your Driver's License for the driver's abstract portion.
5. Attach a copy of your Social Security Card.
6. Attach a check or money order for \$7.00, (\$2.00 dues, \$5.00 application fee) made payable to "South Old Bridge Volunteer Fire Company".

B. Township of Old Bridge Background Check Authorization Form

1. Read this form **before** you sign it. It authorizes the Township Police to conduct criminal record searches.
2. Sign the form where indicated.

C. South Old Bridge Volunteer Fire Company Background Check Authorization Form.

1. This form is similar to the Old Bridge Township authorization form in its use and purpose. It also allows us to perform a driver's abstract.
2. Read it carefully before signing, and be sure to fill in all requested information.
3. This form **must** be notarized by a Public Notary.

Please call 732-251-8596 if you have any questions or need further assistance.

South Old Bridge Volunteer Fire Company, Inc. Application for Membership

Full Name: _____ Date: _____

Current Address: _____

Telephone #: _____ Cell #: _____ E-Mail _____

Social Security #: _____ Drivers License #: _____

Occupation: _____ Date of Birth: _____

Age: _____ Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Answer All Questions:

1. Have you ever been a Firefighter? Yes No
2. Do you object to operating Fire Apparatus? Yes No
3. Have you ever been convicted of a crime or an offense?
(Excluding driving history) Yes No
4. Is your driver's license currently suspended in any of the 50 states? Yes No
5. Have you enrolled in Pre-Trial Intervention (PTI) or
received a conditional discharge? Yes No
6. Are you: Citizen of the United States Naturalized Citizen**
** Copy of naturalization papers must be attached.
- 7 Have you ever been a volunteer? Yes No

If so, provide department and phone number _____

I do hereby certify that I will perform my duties as a firefighter, uphold the Constitution and By-Laws, and that I will attend all the training courses as required by the South Old Bridge Volunteer Fire Company, Inc. Upon termination, I will surrender all property of the South Old Bridge Volunteer Fire Company, Inc. I hereby authorize and consent to a Police Check; drug, alcohol, and AIDS tests for use by the South Old Bridge Volunteer Fire Company, Inc.

**** For Notary Public ****

_____ Being duly sworn
doth depose and says that the above statements are true
to the best of his knowledge and belief.

State of New Jersey, County of Middlesex

This ____ day of _____ 20__

Notary Signature: _____

Seal

Applicants Signature

Print Name

Date

For Office Use Only

Date read at General Meeting: _____.

Screening Date: _____ [] Approved [] Disapproved

Screened by: _____.

Date of Orientation: _____.

Assigned to Engine Company #: _____.

Badge #: _____.

Date of Active Membership: _____.

Check or money order _____ Birth Certificate _____ All portions notarized _____

I; _____, do hereby certify that I have been given a copy of the most current Constitution and By-Laws of the South Old Bridge Volunteer Fire Company, Inc.

Signature

Issued by: _____.

Township of Old Bridge

BACKGROUND CHECK AUTHORIZATION

I, _____, do hereby grant permission to the Township of Old Bridge to make a background check on, including but not limited to, a search for any criminal record. Said information to be used in consideration of my application for employment with the Township of Old Bridge.

Signature

Date

Birth Date

Social Security Number

Street Address

Drivers License Number

City, State

Zip Code

BACKGROUND CHECK AUTHORIZATION

I, _____ do hereby grant permission to the Township of Old Bridge to make a background check on, including but not limited to, a search for any criminal record and Driver’s License Abstract. Said information to be used in consideration of my application for employment with the Township of Old Bridge, Board of Fire Commissioners of Fire District #3, and membership in the South Old Bridge Volunteer Fire Company, Inc.

I understand that in the event an unsatisfactory report is received concerning my criminal record and/or my driving abstract, as judged solely by the Membership Committee of the South Old Bridge Volunteer Fire Company , Inc., that I may be rejected for employment and membership in the South Old Bridge Volunteer Fire Company.

I further understand that in the event my physical examination reveals the use of alcohol or drugs, including prescription medications, which may impair my ability as a firefighter, I may be rejected for employment and membership in the Fire Company.

Signature

Date

Birth Date

Social Security Number

Street Address

Drivers License Number

City, State

Zip Code

**** FOR NOTARY PUBLIC ****

_____ being duly sworn doth depose and says that the Above statements are true to the best of his knowledge and belief.

State of New Jersey, County of Middlesex,

Notary Seal

This _____ day of _____ 20_____

Notary Signature: _____