

City of Rochester Hills 2005 Survey Municipal Fire Departments

1000 Rochester Hills Dr. Rochester Hills, MI 48309 248, 841.2463 www.rochesterhills.org

The Rochester Hills City Council's Public Safety Committee would like your feedback regarding services provided by your Fire Department. We appreciate your time in completing this survey. If you are interested in receiving the compiled information, please check the box below your signature. Thank you!

Profile Information: Please type or print using black ink.
Municipality: Brandon Fire Dept Contact Person: Lobert Mc althur
Mailing Address: 53 South St
City: Octonville State: MI Zip Code: 48462
Business Phone: 248-627-4000 Fax: 248-627-3181
E-Mail: RmcArthur Cbrandonfine.us
Survey Questions:
1. How do you provide Emergency Medical Services (EMS)? Do you use a private source or a Fire-based source, i.e., your municipal Fire Department? Please briefly explain.
File Dopt
2. If you use your municipal Fire Department for EMS services, do you provide the transport service? How? Please briefly explain.
3 ALS units 8 medico
3. What is your initial apparatus response to a medical emergency, i.e. Fire engine, heavy-duty rescue ambulance, etc? Please briefly explain. Ambulance only
4. How do you provide Fire protection? Do you use full-time Fire personnel, part-time Fire personnel, paid-on-call personnel (POC) or a combination? Please briefly explain.
Full time Station Coverage Respond with intell apparatus
5. If you use POC personnel, what is their hourly rate of pay? Do you have any incentive program to retain and enhance POC personnel? Please briefly explain.
Medical TRAININg up thru medic w/kg reement
6. Do you have a Fire-based EMS budget? If so, what has been the annual revenue for the past three (3) to five (5) years? Please briefly explain.
EMS budget is from Ambulainer billing, which is approx

	tations do you currently opera e positions per station? Pleas		taffing numbers for full
Stn#1 2	Pulltime Sta tx#3 6 poc	#2 1 5	ulltim
	tu#3 6 poc		
8. How is your Fire	Department funded, i.e. milla	age, etc? Please bri	efly explain.
Millase	Openatin 3 m.	1/s Four	1 m.//
		70	
•	ocal, state, or federal criteria of Firefighters on duty per 24	•	
170			
	lic Safety Aides or have a Pu be your program to include d		ource.
express ways	escribe your service area to in o; Number of schools build ; Type of zoning, i.e. light	industrial, heavy ir	ndustrial, residential
	assistance from other agencies of the state		olice i.e. other communities,
Signed:	sy al	Dated: _	425-05
Title: Fike	Chic(
	copy of the compiled information	n.	
Ple	ease fax or email the comple	eted survey by May	y 5, 2005 to:
	City of Rochester I Susan Koliba-Galeczka 1000 Rocheste Rochester Hil	Hills Clerk's Office a, City Council Liai er Hills Drive. lls, MI 48309 3. 656.4744	SON DECEIVED
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