

Smoke/Carbon Monoxide Alarm and Fire Extinguishers **EXPRESSION OF INTEREST**

Please attach a letter from your Chief & Council or Administrator. This letter should specify the number of fire extinguishers or smoke/carbon alarms requested for the First Nations homes, and your First Nation's intent to install the smoke/carbon alarms and deliver fire extinguishers to each home within 3 months of receiving them. We suggest you have delegated the installation responsibility before sending this expression of interest to assure completion.

Community Contacts for Installations:

TOTALS

First Nation Name:					
Shipping Address (PO BOX NOT	accepted, physical	address only	<mark>/</mark>):		
Name of Primary Contact:					
Primary Contact Position:					
Email:		Telephone:			
Name of Alternative Contact:					
Email:		Telephone:			
Request for Smoke/Carbon Monoxide Alarms and Fire Extinguishers:					
	Number of Homes that Need Smoke/Carbon Monoxide Alarms		# Alarms Needed	# Kitchen Fire Extinguishers Needed (1 per home)	

Smoke Alarms must be installed within 3 months after receiving them. The FNESS Smoke Alarm Completion form must be sent to FNESS by fax or email upon completing the installation. You will receive the completion form with the smoke alarms/fire extinguishers.



Does your community have a program of regular home safety checks? O YES O NO

If yes, please check any activities that apply	<i>.</i>			
O Test smoke alarms	O Test home heating appliances			
O Test carbon monoxide detectors	O Clean and service wood-fired chimneys			
O Check fire extinguishers	O Clean dryer vents			
Other:				
If yes, who performs the home safety check O Community Fire Department	s?			
O Contracted Fire Protection Service Provider (Municipal Type Services Agreement)				
O Public Works or Maintenance				
O Housing				
Other:				

You can email or FAX your completed EXPRESSION OF INTEREST and letter from your Chief & Council or Administrator:

Email: nroberts@fness.bc.ca FAX: 604-669-9832