James Leonard, Chairman

132nd Anniversary Parade Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Boonton Fire Department

315 Lathrop Ave

Boonton, NJ 07005

Dear Jim:

This is to advise you that we will (or will not) participate in your parade on Saturday, September 2, 2023 at 1:30 pm.

Below is the information requested.

Name of Company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Firefighters in line\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Band or Drum Corps: YES\_\_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_ NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vintage Motor Apparatus: YES\_\_\_\_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_\_\_\_\_\_

Antique Apparatus: YES\_\_\_\_\_\_\_\_\_NO\_\_\_\_\_\_\_\_\_HAND\_\_\_\_\_\_\_\_\_HORSE\_\_\_\_\_\_\_\_\_

 Rescue Truck: YES\_\_\_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_\_\_

Aerial: YES\_\_\_\_\_\_\_\_\_\_NO\_\_\_\_\_\_\_\_\_\_\_\_\_ TYPE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pumper(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mini Pumper: YES\_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_\_ Ambulance: YES\_\_\_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_\_

Chief’s Vehicle:\_\_\_\_\_\_\_\_\_\_\_Other, Please State Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please complete if you plan to attend or not: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List Mailing Address of Fire Dept. or Company: ***(PLEASE PRINT OR TYPE)***

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

COMPANY CHIEF’S NAME

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

NUMBER AND STREET CHIEF’S PHONE NUMBER

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

TOWN STATE ZIP EMAIL ADDRESS