APPOINTMENT OF THE FIRE SAFETY DIRECTOR

ANNOUNCEMENT

DATE:	_		
NAME:	_		
TITLE:	_		
WORK ADDRESS:			
HOME ADDRESS:			
METHODS OF CONTACT:			
OFFICE PHONE:			
HOME PHONE:			
PAGER NUMBER:			
MOBILE PHONE:			
I hereby appoint duties as outlined in the fire safety plan for:	as Fire Safet	ty Director, autho	rized to fulfill the
APPOINTING OFFICER			
NAME:		_	
POSITION:		_	
ADDRESS:		_	
PHONE:			

APPOINTMENT OF THE DEPUTY FIRE SAFETY DIRECTOR

ANNOUNCEMENT

DATE:			
NAME:			
TITLE:			
WORK ADDRESS:			
HOME ADDRESS:			
METHODS OF CONTACT:			
OFFICE PHONE:			
HOME PHONE:			
PAGER NUMBER:			
MOBILE PHONE:			
I hereby appoint	as Deputy Fi i 	re Safety Dire	ctor , authorized to
APPOINTING OFFICER			
NAME:		-	
POSITION:		-	
ADDRESS:		-	
PHONE:		_	