LANCASTER COUNTY FIRE CHIEFS ASSOCIATION INC. APPARATUS STANDARDS CHECKLIST - Tactical Support Unit (TAC)

	ALL ANALOS STANDANDS CITE	<u> </u>	radical dupport dilit (170)	
Unit D	esignation:	Inspe	ction Date	
Year: Make/Model:				
Tour.	I Marto, Moar	/1.		
Personal Protection / Safety Equipment			Unit Type Specifications	
. 0.00	Minimum of 2 Riding Positions	- January	Pump Capacity - 250 gpm minimum	
	1- First Aid Kit		Water Tank - 200 gallons minimum	
	2 - Wheel Chocks		Pump Test Certification (If apparatus is purchased used)	
	5 - Orange Traffic Cones (28" high each)		(apparation participation)	
	Dry Chemical Fire Extinguisher (40 B/C)	Suppo	ort Equipment	
	One Reflective Triangle Kit		1 - Min 24" Halligan Bar	
	Traffic Vest for each riding member		1 - Min 6 pound Flathead Axe	
	1 - Portable Radio for every two riding positions		1 - Chain Saw	
	1 - Mobile Radio			
	Min of 2 SCBA			
	Spare SCBA cylinder for each SCBA			
	1 - AED			
	5 - Illuminated Warning Devices (Ex. Flares)			
		Recon	nmended Equipment (Not Required to Pass)	
Hose / Ap	pliances		Min 100' of 3/4" Booster Line on a Reel	
	Min 400' of 2.5" or 3" Supply Hose	_	Portable Winch w/ Rig Mount (7,000 pounds)	
	Min 200' of 1.5" Attack Hose w/ nozzle	-	50' of Utility Rope	
	2 - Hydrant Wrenches	-	Vehicle Mounted Towing Package (to pull trailers)	
	4 - Spanner Wrenches	-	1 - Pair of Binoculars	
	1 - Rubber Mallet	-	1 - Copy of ERG (Print or Electronic)	
	1 - 2.5" Double Male Adapter	-		
	1 - 2.5" Double Female Adapter	-		
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Unit De				
		ts of Features :		
Attachme	nts / Enclo	sures List:		
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2				
3 4				
5				
		_Pass	Fail	Re-Inspection Date:
Inspector Name:		Print:		Signature:
Inspector Name:		Print:		Signature:
Fire Dept. Rep.:		Print:		Signature: