



**Heavy Rescue Incorporated**  
P.O. Box 50249  
New Bedford, MA 02745  
1-866-323-6111  
www.heavyrescueinc.com

## TURN-OUT GEAR COMPLIANCE FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Department Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

The above named student planning to attend a **Live Fire** training program is or will be using turn-out gear which met the following standards at the time of purchase by the student or the sponsoring Agency.

NFPA 1971: Standard on Protective Ensemble for Structural Fire Fighting

Full Ensemble Includes:    Helmet  
   Protective Hood  
   Coat  
   Trousers  
   Boots  
   Gloves

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If purchased by the Department:

\_\_\_\_\_  
Chief of Department Signature

\_\_\_\_\_  
Date

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If purchased by the student:

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date