

*NOTIFICATION OF DEATH OF A FIREFIGHTER*

*Name of Deceased:* \_\_\_\_\_

*Rank:* \_\_\_\_\_ *Years of Service:* \_\_\_\_\_

*Fire Department:* \_\_\_\_\_

*Was This Line of Duty?* \_\_\_\_\_

*Does Presumptive Legislation Apply?* \_\_\_\_\_

*WSIB Registration Number:* \_\_\_\_\_

*Date of Funeral:* \_\_\_\_\_

*Funeral Arrangements (if current):* \_\_\_\_\_

*Including Location:* \_\_\_\_\_

*Next of Kin, Name:* \_\_\_\_\_

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

\_\_\_\_\_

*Telephone &/or E-Mail* \_\_\_\_\_

*Circumstances of Death:* \_\_\_\_\_

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*Send to: Jim Richards, Memorial Chair*  
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*email: ffaomemorial@sympatico.ca*