



AFFIDAVIT

STATE OF TENNESSEE)
COUNTY OF _____)

I, _____, do hereby certify that _____
(Print name of Chief of Fire Department) (Print name of deceased firefighter)

was a volunteer firefighter as defined by Tenn. Code Ann. § 7-51-206(a)(3) and was
a volunteer with the _____, which is a duly recognized
(Name of fire department)
department with the Tennessee State Fire Marshal. I further certify that the firefighter listed
above was required to extinguish and control fires or fire-related incidents and that his/her death
occurred in the course of his/her duties and in the actual discharge of the duties of a volunteer
firefighter on the _____ day of _____ in the year of _____.

Signature of Chief of Fire Department

Date

Sworn to and subscribed before me on this _____ day of _____, _____.

Notary Public

My commission expires: _____