



United Fire Brigades' Association of New Zealand Incorporated
PO Box 56079, Wellington, Ph: (04) 237 0265, Fax: (04) 237 2680

APPLICATION FOR MERITORIOUS SERVICE CERTIFICATE FOR POSTHUMOUS PRESENTATION

We the undersigned Chief Fire Officer and Secretary of the

_____ Fire Brigade/Association

hereby request the granting of a

POSTHUMOUS CERTIFICATE FOR SERVICES

to

(deceased's name)

The details of service have been checked and confirmed with the rolls and we certify as correct.

_____ Chief Fire Officer

_____ Secretary

_____ Date

_____ Delivery Address

PARTICULARS FOR THE CERTIFICATE (Please print details distinctly)

NAME: _____

BRIGADE/ASSOCIATION: _____

DATE OF SERVICE: _____

RANK AT TIME OF DEATH: _____

PRESENTATION DATE: _____

Ensure this application reaches the UFBA Office 2 months prior to the Presentation date with payment – Thank you