



**ESSEX COUNTY OFFICE OF  
EMERGENCY SERVICES**  
**ENHANCED 911**  
 702 STOWERSVILLE ROAD  
 LEWIS, NY 12950  
 OFFICE 518-873-3900 / FAX 518-873-3963



MATTHEW WATTS  
 DIRECTOR / FIRE COORDINATOR

JOSHUA FAVRO  
 DEPUTY DIRECTOR / E911 COORDINATOR

**Essex County Hazardous Materials/WMD Special Operations Application**

\_\_\_\_\_  
 Last First M.I.

\_\_\_\_\_  
 Street Address Apartment/Unit #/PO Box

\_\_\_\_\_  
 City State Zip Code

\_\_\_\_\_  
 Cell Phone Number and Carrier E-Mail Address

\_\_\_\_\_  
 Fire Department / Ambulance Squad Affiliation

\_\_\_\_\_  
 What level of training do you have?

\_\_\_\_\_  
 Date of last firefighter physical Date of last fit test

\_\_\_\_\_  
 Why do you want to join the HazMat Team?

\_\_\_\_\_  
 Applicant Signature Date

\_\_\_\_\_  
 Fire Chief's Approval Date

\_\_\_\_\_  
 HazMat Coordinator Approval Date

\_\_\_\_\_  
 Emergency Services Director Approval Date