

MEMBER FIRE EQUIPMENT COMPLIANCE – UPDATE FORM

FPA Registration N° 838/01

COMPULSORY COMPLETION – PER FARM – IN TERMS OF THE RULES & REGULATIONS

VELD firefighting equipment & staff – GUIDELINE REQUIREMENTS													
Property Size	Bakkie Sakkie Min 500 ℓ	Water tanker Min. 1 000 ℓ	Water tanker Min. 2 000 ℓ	Rake Hoes	Beaters	Knap Sacks Min 15ℓ	Drip Torch	Cell Phone	Handheld Radio	Mobile Radio	1 st Aid Kits	Firefighters	Crew Leaders / Owner
1 – 25 ha	Avail. in 15 min*	NIL	NIL	1	4	2	NIL	1	NIL	NIL	1	2	1
26 -100 ha	1	NIL	NIL	2	5	2	NIL	1	NIL	1	1	4	1
100 - 500 ha	1	1	NIL	5	10	4	1	1	1	1	1	9	1
500 – 1 000 ha	1	1	NIL	5	20	10	1	1	2	3	2	19	1
1 000 – 4 000 ha	2	NIL	2	10	20	10	2	1	4	4	2	30*	3
4 000 – 10 000 ha	4	NIL	4-5	20	40	40	2	1	4	6	5	60*	6*
Sawmill / Charcoal	1	NIL	NIL	4	4	2	NIL	1	NIL	NIL	NIL	4	1

FORESTRY firefighting & staff – GUIDELINE REQUIREMENTS													
Property Size	Bakkie Sakkie Min 500 ℓ	Water tanker Min. 2 000 ℓ	Water tanker Min. 5 000ℓ	Rake Hoes	Beaters	Knap Sacks Min 15 ℓ	Drip Torch	Cell Phone	Handheld Radio	Mobile Radio	1 st Aid Kits	Firefighters	Crew Leaders / Owner
1 – 25 ha	1	NIL	NIL	6	4	2	NIL	1	NIL	NIL	1	4	1
26 - 100 ha	2	1	NIL	10	6	10	NIL	1	NIL	1	1	10	1
100 - 500 ha	2	1	NIL	20	10	15	2	1	2	2	2	20	1
500 – 1 000 ha	2	2	NIL	25	20	20	2	1	2	3	2	30*	1
1 000 – 4 000 ha	2	2	NIL	40	40	20	2	1	4	4	2	50*	3
4 000 – 10 000 ha	4	NIL	4	100	100	40	2	1	4	7	5	100*	6*

* Access to

MEMBERS FIRE FIGHTING EQUIPMENT ON FARM AT PRESENT

IF NOT CURRENTLY COMPLIANT, PLEASE INDICATE DATE EQUIPMENT WILL BE ACQUIRED:_____.

Name and Contact Details of Representative if Absent:		
Truck Tankers	No.	Litres
Tractor Drawn Tankers	No.	Litres
Tractor Mounted Tanks	No.	Litres
N° of Bakkie Sakkies	No.	Litres
N° of Knapsacks	No.	Litres
No. of Fire Beaters	No.	
No. of Rake Hoes	No.	
Quick Fill Pump	No.	
Overhead Quick Fill Point	Yes ☐ No ☐	
Dams / Rivers – Suitable for Suction	Yes ☐ No ☐	
Dams – Helicopter Suitable (Minimum Depth 2 Meter)	Yes ☐ No ☐	
N° of Available Labour on Farm		
Optional: Mid Band Radio	Yes ☐ No ☐	
Mid-Band Channels	KZNFPFA North ☐	Spotter ☐
	KZNFPFA South ☐	Other
	LRFI ☐	

I confirm that above information is correct and understand the onus on me to ensure FULL COMPLIANCE and all information is kept up to date with the LRFPA.

SIGNATURE:_____.

Date:_____.