



Station #1 – 32628 Oak Orchard Road, Millsboro, DE 19966  
Station #2 – 25375 Banks Road, Millsboro, DE 19966

RE: IRVFC Membership Application and Related Documentation Packet

Dear Prospective Member:

Identified herewith is the Indian River Volunteer Fire Company, Inc.'s Membership Application packet that must be completed in its entirety without exception. You will be required to complete the following components:

- |  |          |
|--|----------|
| 1) Application For Membership<br>Personal Information; Employment Information; Character References;<br>Previous Firefighting Experience; Background Questionnaire; and<br>Applicant Acknowledgement | Page 1-3 |
| 2) DVFA Contributory Designation/Change of Beneficiary Form  | Page 4   |
| 3) Waiver of Confidentiality   | Page 5   |
| 4) IRVFC & DVFA Criminal History Affidavit (Notary Required)   | Page 6-8 |
| 5) Verification of Criminal Background Check Execution   | Page 9   |

Again, the aforementioned components of the Membership Application must be completed in their entirety without exception. Failure to comply could result in the rejection of your application and implementation of a suspension period for acceptance of future applications.

You will be required to obtain a Criminal History Record from the Delaware State Police – State Bureau of Identification (SBI). The Criminal History Record is to be forwarded to the following address:

Indian River Volunteer Fire Company, Inc.  
ATTN: Membership Applicant Services  
32628 Oak Orchard Road  
Millsboro, Delaware 19966

If you should have any questions, please do not hesitate to contact me at (302) 436-1070, extension 130 or [Patrick.Miller@irvfc.com](mailto:Patrick.Miller@irvfc.com) at your earliest convenience.

Highest Regards,

Patrick C. Miller  
President

ATTACHMENTS  
PCM:tnw



CHARACTER REFERENCES

Please list two (2) personal references that are not related to you.

Reference #1

\_\_\_\_\_  
*Full Name*

\_\_\_\_\_  
*Home Phone* *Cell Phone*

Reference #2

\_\_\_\_\_  
*Full Name*

\_\_\_\_\_  
*Home Phone* *Cell Phone*

PREVIOUS FIREFIGHTING EXPERIENCE

Do you have any previous firefighting experience or training?

Yes

No

Department:

\_\_\_\_\_  
*Name of Department/Company (Please Include State)* *Phone Number*

\_\_\_\_\_  
*Position(s) Held* *Years of Service*

Department:

\_\_\_\_\_  
*Name of Department/Company (Please Include State)* *Phone Number*

\_\_\_\_\_  
*Position(s) Held* *Years of Service*

BACKGROUND QUESTIONNAIRE

1) Do you have a Police Record other than minor traffic violations?

Yes  No

2) Do you object to having your record investigated?

Yes  No

3) Are you presently awaiting court action for anything other than minor traffic violations?

Yes  No

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

APPLICANT ACKNOWLEDGEMENT

I understand that upon acceptance into the Indian River Volunteer Fire Company, Inc. I am required and expected to participate in various activities as outlined in the company BY-LAWS and based upon my respective membership type. I further understand that upon acceptance into this company I am on a one (1) year probationary period and must meet all requirements of a member and failure to do so will result in dismissal from the company. I hereby acknowledge that the above questions and information have been answered correctly to the best of my knowledge. If it is discovered at any time that I have made a willfully false statement, it will be considered just cause for dismissal from the company.

Applicant's Signature

\_\_\_\_\_

Date

\_\_\_\_\_

**MEMBERSHIP ELIGIBILITY REQUIREMENT & SELECTION**

Please review the information below and select your desired Membership Type.

Junior Membership (Age 16-17)	Active Membership (Age 18+)
Regular Membership (Age 40+ and at your request)	Honorary Membership (Must be nominated)

**MEMBERSHIP ELIGIBILITY**

Any person 16 years of age or older having good character and habits, residing within the fire district of the Company or within a 2 mile of radius of the district boundary shall be eligible for membership in the company. However, if an applicant was previously a member of this company and was expelled, they shall be ineligible for membership in the company for a period not less than five (5) years from the date of expulsion. Any other exceptions to the qualifications for membership, except as previously stated, must be approved by the membership through a standard ballot, at the time the application is introduced. The company shall not advocate, support, or practice discrimination based on race, religion, age, national origin, language, sex, sexual preference, gender, gender identify, gender expression or perception, or physical handicap.

**TYPES OF MEMBERSHIP**

- A. JUNIOR MEMBERSHIP - Are members age 16 through 17 years of age. They will not have voting privileges in fire company matters, they are not permitted to operate any fire fighting vehicles or vessels, nor will they hold an elective office while a junior member. However, junior members will be issued a key after their probationary period is over.
- B. ACTIVE MEMBERSHIP - Active members are vital to the efficient operations of the fire company and are due all respect, rights, and privileges defined throughout these documents.
- C. REGULAR MEMBERSHIP - Any person over age 40 and specifically requests to be classified as a Regular member, OR those deemed to have physical, emotional, and/or mental impairment where the firefighting activities could endanger their life, welfare and/or livelihood.

A Regular member is not compelled to be an Active member/firefighter, but must contribute to the good of the company in some other way.

Age is not a specific criterion to move from Active membership status to Regular membership status.

If a member and/or applicant over the age of 40 should choose to be an Active Member, then the requirements for Active membership, as identified in V, Article I, Section 3; V, Article II, Section 2 (A); V, Article II, Section 2 (D); ET. AL. shall prevail. A member cannot choose to be an Active member and switch to Regular membership to evade any Inactive membership requirements.

**APPLICANT CONSENT**

I, \_\_\_\_\_, the undersigned applicant for membership with the Indian River Volunteer Fire Company, Inc. hereby waives the physician-patient privilege of confidentiality, and does hereby consent that the Indian River Volunteer Fire Company, Inc. may request copies, examine and/or copy, any and all medical record bearing upon my character, personal characteristics, habits, associates, and/or traits.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

The undersigned, upon oath, deposes and states as follows: that he/she is the person whose signature appears hereinabove on the instrument entitled "Character/Personal Reference and Consent"; that he/she has read the same and is aware of the consent thereof; that the same is true and correct according to the best knowledge and belief of the undersigned; and that he/she executed same freely and voluntarily.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Sworn to and subscribed before me this _____ day of _____, _____.
Notary Public: _____
<i>(Seal Endorsement)</i>

**STATE OF DELAWARE**

Telephone: 302-739-4208  
 Toll Free Number Outside of DE  
 1-800-722-7300  
 Fax: 302-739-6129  
 E-Mail: [pensionoffice@state.de.us](mailto:pensionoffice@state.de.us)

**Delaware Volunteer Firefighters Association**

**CONTRIBUTORY DESIGNATION/CHANGE OF  
 BENEFICIARY FORM**

Office of Pensions  
 McArdle Building  
 860 Silver Lake Blvd. Suite 1  
 Dover, DE 19904-2402  
[www.delawarepensions.com](http://www.delawarepensions.com)

(Please Print)

**NAME** \_\_\_\_\_

**PENSION ID#** \_\_\_\_\_  
(found on your annual statement or pension advice)

**And/Or**

**PHRST EMPLOYEE ID#** \_\_\_\_\_  
(found on your pay advice)

**One of the above ID numbers must be completed to update your record.**

I hereby *revoke any previous beneficiary(ies) designation* and I direct that the excess amount, if any, of my accumulated pension contributions, with interest, over the aggregate of all pension payments made shall be paid to the beneficiary(ies) designated below, if living.

If more than one beneficiary is designated, unless primary and contingent is noted, I understand payment will be made in equal shares to such of the designated beneficiaries as survive me. If at the death of the member, there is no designated beneficiary, for all or any part of the death benefit, the amount of death benefit payable for which there is no designated Beneficiary shall be payable to the estate of the member. However, the Pension Fund, at its option, may pay such amount to any of the surviving relatives: wife, husband, mother, father, child or children and payment to any one or more of such surviving relatives shall completely discharge the Pension Fund's liability with respect to the amount of death benefit paid.

Name of Beneficiary	P *	C *	Complete Address (include Street, City, State & Zip)	Social Security Number	Date of Birth	Relationship

**\*P=Primary C=Contingent**

The right is reserved to revoke this designation and to designate new beneficiaries at any time by completing a new Designation or Change of Beneficiary Form.

**Please indicate the applicable pension plan for this beneficiary designation** Volunteer Fireman's Pension Plan

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**RETURN THIS FORM TO THE PENSION OFFICE ONLY IF CHANGES ARE REQUESTED**



Indian River Volunteer Fire Company  
Serving Oak Orchard, Riverdale, Long Neck and Vicinity

Station #1 – 32628 Oak Orchard Road  
Millsboro, Delaware 19966  
Phone: (302) 945-2800 • Fax: (302) 945-1130

Station #2 – 25375 Banks Road  
Millsboro, Delaware 19966  
Phone: (302) 945-2801 • Fax: (302) 947-9447

WAIVER OF CONFIDENTIALITY

TO: ANY LOCAL, STATE OR DEFERAL LAW ENFORCEMENT AGENCY;  
ANY DIRECTOR, DEAN, REGISTRAT OR ANY AUTHORIZED PERSON AT ANY SCHOOL, TRADE  
SCHOOL OR FIRE ENTITY;  
ANY PAST OR PRESENT EMPLOYER; AND/OR  
ANY DIVISION OF MOTOR VEHICLE (DRIVERS LICENSE INFORMATION)

I, \_\_\_\_\_, the undersigned, have applied for membership OR am currently a member of the Indian River Volunteer Fire Company, Inc. I hereby waive the benefit of any statue(s), rule(s) or regulation(s) prescribing confidentiality of record(s) of any state or federal law enforcement agency, any educational institution(s), any past or present employer and/or any Division of Motor Vehicle agency.

I am aware that my background may be investigated and I hereby authorize and request the release of any and all information you have that concerns me, including but not limited to disciplinary matters, character references, professional references and/or driving record information.

This authorization, or a reproduction thereof, shall be valid for the duration of my membership with the Indian River Volunteer Fire Company, Inc.

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Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
 Social Security Number \_\_\_\_\_ Driver License Number \_\_\_\_\_  
 State of Issuance \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_

Given under my hand, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signature of Applicant/Member \_\_\_\_\_ Signature of Witness \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Notary Public: \_\_\_\_\_

(Seal Endorsement)



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**IRVFC & DVFA**  
**DELAWARE VOLUNTEER FIREMEN’S CRIMINAL HISTORY AFFIDAVIT**

Pursuant to Indian River Volunteer Fire Co., Inc. (IRVFC) POLICY RESOLUTION #2007-001, IRVFC values the volunteerism of its volunteer fire personnel and requires that fire company members uphold the highest level of integrity and value the public’s trust while serving in the volunteer fire service. Therefore the following statement, affidavit and documentation must be read, acknowledged, notarized and submitted along with each application without exception.

Statement: Pursuant to the 144<sup>th</sup> Delaware General Assembly’s House Bill #251 which was signed by the Honorable Ruth Ann Minner, Governor of the State of Delaware on July 17, 2007 and effective September 17, 2008, an affidavit must be completed by all applicants for membership in a Delaware volunteer fire department and attached to the application for members. An application is not considered complete and shall not be processed until the notarized affidavit is attached and retained in the fire company’s membership files.

Affidavit: I have never been convicted of an offense that constitutes any of the crimes set forth in Title 16 Delaware Code, §6647 or any similar offense under any federal, State or local law. I hereby certify that the statements contained in this application are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement in this application, I am subject to penalties prescribed by law, including denial or revocation of membership in the volunteer fire department and a mandatory fine of at least \$1,000 or a term of imprisonment of up to 2 years, or both.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

In the event that you are unable to submit the above statement, you must complete the following information:

I am unable to submit the above statement. My written explanation as to what is not true with regard to the above statement and why is set forth below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attach additional pages if needed along with a certified copy of your criminal history record from the appropriate authorities.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

NOTARIZATION OF DELAWARE VOLUNTEER FIREMEN'S CRIMINAL HISTORY AFFIDAVIT

\_\_\_\_\_ (COUNTY)

\_\_\_\_\_ (STATE)

Before me personally appeared, \_\_\_\_\_, Applicant, of lawful age, to me known to be the identical person who signed this document of application and being by me first duly sworn, on oath state that all the foregoing statements are true and correct to the best of my knowledge and belief.

Notary Public Signature: \_\_\_\_\_

Notary Public Name: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

(SEAL)

The Indian River Volunteer Fire Company authorizes the presiding administrative officer to complete and incorporate the required statements and documentation in order to fully implement and comply with the aforementioned legislative initiative.

The Delaware Legislature intent it to "...prohibit a person who has been convicted of or, had he or she been charged with as a juvenile, adjudicated delinquent of any of the following crimes is prohibited from serving as a firefighter in the State of Delaware:

- 1) A felony involving sexual misconduct where the victim's failure to affirmatively consent is an element of the crime, such as forcible rape;
- 2) A felony involving the sexual or physical abuse of a child or of any elderly or infirm person, such as sexual misconduct with a child, sexual exploitation of a child, making or distributing child pornography, incest involving a child, or assault on an elderly or infirm person;
- 3) A crime in which the victim is an out-of-hospital patient or a patient or resident of a healthcare facility, including abuse, neglect, or theft from or financial exploitation of a person entrusted to the care or protection of the applicant;
- 4) Arson in the third, second or first degree; reckless burning or exploding; cross or religious symbol burning; or any crime in which the applicant intentionally or recklessly started a fire or caused an explosion, or attempted or conspired to do so;
- 5) A law of another state, territory or jurisdiction which is the same or equivalent to the offenses described in paragraphs (1) through (4) of this subsection.

Membership in the Indian River Volunteer Fire Company must be denied if the applicant has been convicted or, he or she was charged as a juvenile, has been adjudicated delinquent of any of the following crimes, except in extraordinary circumstances:

- 1) Any crime for which the applicant is currently incarcerated, on work release, on probation, or on parole;
- 2) Any crime in the following categories, unless at least 5 years have passed since the applicant's conviction or at least 5 years have passed since the applicant was released from custodial confinement, whichever occurs later:
  - a. A serious crime of violence against a person, such as assault with a dangerous weapon, aggravated assault, murder, or attempted murder, manslaughter, (other than involuntary manslaughter), kidnapping, or robbery of any degree;

- b. A crime involving a controlled substance or designer drug, including unlawful possession or distribution of, or intent to unlawfully possess or distribute, a controlled substance in Schedules I through V of the Uniform Controlled Substance Act of Chapter 47 of this title;
- c. A serious crime involving property, such as burglary, embezzlement, or insurance fraud;
- d. Any crime involving sexual misconduct
- e. A crime of another state, territory, or jurisdiction which is the same or equivalent to the offenses described in subparagraphs a. through d of this paragraph.

3. In extraordinary circumstances, membership may be granted under subsection (b) of this section only if the applicant established by clear and convincing evidence that his or her membership will not jeopardize public health or safety.

An applicant for membership in the Indian River Volunteer Fire Company who knowingly provides false, incomplete, or inaccurate criminal history information, or who otherwise knowingly violates a provision of this subchapter, is guilty of a class G felony. In addition to a term of imprisonment of up to 2 years, the Courts shall impose a fine of no less than \$1,000, which may not be suspended.

The State Fire Prevention Commission shall adopt regulations to implement the provisions of this subchapter. The regulations must include, as part of the application form for membership in a Delaware volunteer fire department, a dated and signed statement by the applicant swearing to or affirming the aforementioned statement.

An applicant for membership in the Indian River Volunteer Fire Company who is denied membership or whose membership is revoked because of the requirements of this subchapter may appeal the denial or revocation to the State Fire Prevention Commission within 15 days of written notification of the denial or revocation by the Indian River Volunteer Fire Company. An appeal under this subsection must be held in accordance with the appropriate provisions of the Administrative Procedures Act, Chapter 101 of Title 29, and is subject to judicial review under subchapter V of Chapter 101.

Motion to accept and implement this authorization and to encourage existing and all future officers to comply and obtain a criminal history statement and complete a criminal history affidavit is paramount to the successful implementation of the aforementioned Policy Resolution. The Indian River Volunteer Fire Company will pledge to evaluate options to minimize the cost to membership upon successful completion of their respective probationary membership requirements. This Policy Resolution will be effective immediately and shall mandate compliance with all applicants of the volunteer fire service within the jurisdiction of the Indian River Volunteer Fire Company.



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**VERIFICATION OF PROVIDING FINGERPRINTS TO THE  
DELAWARE STATE POLICE**

The below names individual was fingerprinted by \_\_\_\_\_  
on the below indicated date for the purposes of obtaining a Criminal History Background Check from  
the Delaware State Police for the purposes of joining the volunteer fire service with the Indian River  
Volunteer Fire Company, Inc.

Signature of Applicant \_\_\_\_\_  
Applicant's Printed Name \_\_\_\_\_  
Applicant's Date of Birth \_\_\_\_\_

Please have the Criminal History Background Information forward to:

**Indian River Volunteer Fire Company, Inc.**  
**ATTN: Membership Applicant Services**  
32628 Oak Orchard Road  
Millsboro, Delaware 19966  
(302) 945-2800

If there are any questions, please do not hesitate to contact the Indian River Volunteer Fire Company at  
your earliest convenience at (302) 945-2800 or (302) 945-2801.

Signature of SBI Agent \_\_\_\_\_  
SBI Agent's Printed Name \_\_\_\_\_  
Date Completed \_\_\_\_\_