



**YADKIN COUNTY VOLUNTEER FIRE AND RESCUE ASSOCIATION  
FALLEN FIREFIGHTER MOBILE UNIT**

Damage Assessment

Front \_\_\_\_\_  None  
Driver Side \_\_\_\_\_  None  
Rear \_\_\_\_\_  None  
Passenger Side \_\_\_\_\_  None

Contact Person Name \_\_\_\_\_

Phone(s) (\_\_\_\_)\_\_\_\_\_, (\_\_\_\_)\_\_\_\_\_, (\_\_\_\_)\_\_\_\_\_

Dept. Name \_\_\_\_\_

Decedent Name(s) \_\_\_\_\_

Date of Expected Return \_\_\_\_/\_\_\_\_/\_\_\_\_

Person Received/Checked-Out \_\_\_\_\_

Person Returned/Checked-In \_\_\_\_\_