

How F*cked is your truck?
Fix our Fire Service Audit #2

We ask that if you have a delegates or HSR for them to complete this audit - We need ONE audit for each FRNSW Station, if you have both a Delegate and HSR or neither in your station make a plan to do the audit together with your platoon or agree on who will do it.

This survey will take 5 - 20 minutes depending on how many appliances are at your station.

Please note we ask you to include photos in the audit. Photos will be very important as we progress this project.

Your individual information will not be used without your consent. Please contact your organiser or the FBEU Office if you have questions.

* 1. I have spoken to others at my station/workplace to make sure we only complete one audit.

I am a:

- Delegate
- Health and Safety Rep
- We don't have a delegate - I will be the contact for this project and work with the team to get a delegate

* 2. Our station/workplace number is

* 3. Our station/workplace name is

* 4. Name

* 5. Personal Email Address

* 6. How many appliances are at your station?

- 1 2 3 4 5

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Appliance #1

7. What type of appliance is this?

- | | | |
|--|--|---------------------------------------|
| <input type="radio"/> Tanker | <input type="radio"/> CAFS Pumper | <input type="radio"/> Ladder Platform |
| <input type="radio"/> CAFS Tanker | <input type="radio"/> Aerial Pumper | <input type="radio"/> Ladder |
| <input type="radio"/> Composite Tanker | <input type="radio"/> Rescue Pumper | <input type="radio"/> LSV |
| <input type="radio"/> Bulk Tanker | <input type="radio"/> Runner | <input type="radio"/> Rehab |
| <input type="radio"/> Light Tanker | <input type="radio"/> Rescue | <input type="radio"/> People Carrier |
| <input type="radio"/> Hazmat Tanker | <input type="radio"/> Flyer | <input type="radio"/> Heavy Hazmat |
| <input type="radio"/> Hazmat Pump | <input type="radio"/> Technical Rescue | <input type="radio"/> Hazmat Support |

8. What are the call signs of these appliances?

9. What is the age of this appliance?

10. Is this appliance fitted with MDT (Mobile Data Terminal) ?

- Yes
 No
 Other (please specify)

11. Have you ever been given a commitment by FRNSW in writing that your appliance would be upgraded, only to have this commitment unfulfilled?

- Yes
 No
 Other (please specify)

12. Does the appliance have airbags?

- Yes
 No

13. Have you experienced breakdown or other issues with fleet in the past 12 months?

- Yes, once
- No, never
- Yes multiple times (please specify)

14. Are your appliances fitted with essential bushfire protections, such as Burn Over Protection Systems (BOPS)?

- Yes, BOPS
- No
- Yes, other (please specify)

15. Is there anything else you would like to add the state of this appliance? e.g. issues with stowage

* 16. Does your station have another appliance *(that you've not filled out an audit for)*?

- Yes
- No

17. Photo of Appliance

 No file chosen

18. Photo of Appliance

 No file chosen

19. Photo of Appliance

 No file chosen

20. Photo of Appliance

 No file chosen

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Thank you for completing this audit

75. Is there anything else that you would like to add?