



15410 US Highway 231
Union Grove, AL 35175

Phone: (256) 776-7786
Fax: (256) 498-0924
www.FireTruckMall.com

Please complete this form to the best of your knowledge.
The more information you can provide us, the better equipped we will be in marketing your truck!

Customer Information:

Fire Department/Owner: _____ Name of Contact: _____

Phone Number: _____ Fax: _____ Email: _____

Where is the truck currently located (city, state): _____

Apparatus:

Year: _____ VIN: _____ Shop Order #/ Build #: _____

Chassis: Manufacturer: _____ Model: _____ 4x4 (y/n): _____

Fire Body: Manufacturer: _____ Model: _____

Aerial: Manufacturer: _____ Model: _____ Length: _____

Aerial Hours: _____ Date of Last Aerial Certification: _____

Mileage: _____ Engine Hours: _____ # Cab Seating: _____ # SCBA Seats: _____

Engine: Make: _____ Model: _____ HP: _____ Diesel or Gas: _____

Transmission: Make: _____ Model: _____ Automatic or Manual: _____

Pump: Make: _____ Model: _____ GPM: _____ Pump and Roll (y/n): _____

Date of Last Pump Certification: _____ Foam System (make and model): _____

Water Tank: Gallons: _____ Material: _____ Foam Tank(s): _____

Discharges (number and size):

Driver's Side: _____ Officer's Side: _____

Front: _____ Rear: _____

Suctions (number and size):

Driver's Side: _____ Officer's Side: _____

Front: _____ Rear: _____

Crosslays (# and size): _____ Piped for Deck Gun (y/n): _____ Deck Gun Included (y/n): _____

Booster Reels: _____

Generator: Brand: _____ Wattage: _____ Fuel Type: _____ Hours: _____

Check All that Apply:

- | | | |
|--|--|---|
| <input type="checkbox"/> Electric Reels: _____ | <input type="checkbox"/> Hydraulic Reels: _____ | |
| <input type="checkbox"/> Telescoping Lights: _____ | <input type="checkbox"/> LED Lighting: _____ | |
| <input type="checkbox"/> Light Tower: _____ | <input type="checkbox"/> Cascade System: _____ | |
| <input type="checkbox"/> Ground Ladders: _____ | <input type="checkbox"/> Breathing Air (aerials only): _____ | |
| <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Automatic Tire Chains | <input type="checkbox"/> Interior EMS Cabinet |
| <input type="checkbox"/> Aluminum Hose Bed Cover | <input type="checkbox"/> Federal Q Siren | <input type="checkbox"/> Jake Brake |
| <input type="checkbox"/> Arrowstick | <input type="checkbox"/> Hydraulic Ladder Rack | <input type="checkbox"/> Pump Heat Pan |

Dimensions: Length: _____ Height: _____ GVWR: _____ Wheelbase: _____

Additional Features or Loose Equipment:

Maintenance/Repairs Needed?

Click Here for a Photo Guide to take the best pictures of your apparatus!