

Emergency Services Division
On-Call Report Form

Date	Time	Caller Name and Title	Contact #'s	Action Requested	Follow up required
	<input type="checkbox"/> Am <input type="checkbox"/> Pm		Area Code:		

SEARCH

# Missing Person(s):	Search Area:	RCMP or RNC	GSAR: Yes or No
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Air Services called at: Helicopter on weather hold: Yes or N If Yes, JRCC Requested: Yes or No Time:

Any other than above indicated requested additional hours of helicopter search time as per protocol: Yes or No

Authorized two (2) hours of search time once the helicopter is on site: Yes or No Time:

Authorized two (2) additional hours of helicopter search time as per protocol: Yes or No Time:

FIRE

FSD Staff contacted:	Time: By Phone: Yes or No
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Type: Residential () Commercial () Vehicle () Trailer () Other:

OTHER

Details:

Use notes page or reverse side if more space is required

NOTE: This form, along with any rough notes that were made at the time the call was received, must be retained and securely stored for possible evidentiary purposes by the Emergency Services Division staff member who completed it.

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NOTES PAGE

(Draw a diagonal line down through any unused portion of page and initial by end of line.)

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