

TOWN OF WARREN

**Fire Marshal
Job Description**

See attached Letter from Robert J. Ross, State Fire Marshal, dated June 12, 2013 regarding Local Fire Marshall Duties



**STATE OF CONNECTICUT
DEPARTMENT OF CONSTRUCTION SERVICES
OFFICE OF STATE FIRE MARSHAL**



Date: June 12, 2013
To: Local Fire Marshals
From: Robert J. Ross, State Fire Marshal
Re: Local Fire Marshal Duties

Below are areas of greater responsibility that are placed upon the local fire marshal. The fire marshal has the prime obligation of enforcing regulations affecting life, property and public protection from the hazards of unfriendly fire.

If I can be of any assistance or answer any questions, please do not hesitate to communicate with my office.

The local fire marshal is required to perform a variety of important duties. The following information is provided to help you better understand the widespread responsibilities fulfilled by the local fire marshal's office. To this end, I ask that you share this with your community leaders.

According to the US Fire Administration and the National Fire Protection Association's Fire Analysis and Research Division, in 2011 US fire departments responded to an estimated 1,389,500 fires representing an increase of about 4% from 2010. With regard to fire deaths, for the year 2011 there were 3,005 civilian fire deaths and 17,500 civilian fire injuries in the United States. Nationally, the death rate was 11.1 deaths per million population, a decrease of 3.7% from 2010, with the Northeast region being the worst at 11.3 deaths per million, and the West region being the best at 5.2 deaths per million population. For the year 2010, Connecticut's fire death rate was 7.0 deaths per million population. The major strategies for reducing these risks are implemented through the duties of the local fire marshal.

I cannot emphasize enough the importance of the local fire marshal's role in protecting the community from the devastation of unfriendly fires. Each community must recognize their local

responsibilities and afford the fire marshal the necessary resources to fulfill the statutory mandates.

Fire Marshals are responsible for the enforcement of many of the sections found in Part II of Chapter 541 of the Connecticut General Statutes (CGS) as well as the numerous codes that are promulgated under the provisions of these statutes.

CGS Section 29-305 allows the State Fire Marshal to provide a schedule for the frequency inspections in the State Fire Safety and Fire Prevention Codes. This schedule permits the fire marshal to inspect buildings and facilities of public service and those occupancies regulated by these codes on a frequency of less than annually, **except for residential buildings occupied by three or more families** which must be inspected annually pursuant to CGS 29-305. Any buildings or occupancies located on state property are subject to inspection by the Office of State Fire Marshal.

The State Fire Safety Code covers all occupancies except one and two family dwellings and currently those located on premises used for manufacturing. The definitions for these occupancies are found in the State Fire Safety Code.



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Examples of the occupancies covered by the State Fire Safety and Fire Prevention Codes are listed below:

ACADEMIES	DRY CLEANING PLANTS	SURFACE, UNDERGROUND
APARTMENTS	EXHIBITION HALLS	AND MARINE PUBLIC
BUILDINGS	FREIGHT TERMINALS	TRANSPORTATION
ARMORIES	GAS PLANTS	PENAL INSTITUTIONS — JAILS,
ASSEMBLY HALLS	GENERAL OFFICES	REFORMATORIES
AUCTION ROOMS	GRAIN ELEVATORS	POOL ROOMS
AUDITORIUMS	GYMNASIUMS	POWER PLANTS
BARNs — COMMERCIAL	HANGARS (STORAGE ONLY)	PUMPING STATIONS
BED & BREAKFASTS	HOMES FOR THE AGED	RECREATIONAL PIERS
BOARD-CARE FACILITIES	HOSPITALS	REFINERIES
BOWLING LANES	HOTELS	RESIDENTIAL-CUSTODIAL CARE
PLACES OF RELIGIOUS WORSHIP	INDUSTRIAL OCCUPANCIES	NURSERIES
CITY HALLS	KINDERGARTENS	RESIDENTIAL-RESTRAINED
CLUB ROOMS	LABORATORIES	CARE
COLD STORAGE	LAUNDRIES	RESTAURANTS
COLLEGES	LIBRARIES	SAWMILLS
CONFERENCE ROOMS	LODGING OR ROOMING HOUSES	SCHOOLS
CORRECTIONAL CENTERS	MENTAL DISABILITY CARE	SHOPPING CENTERS
COURTHOUSES	MORTUARY CHAPELS	SKATING RINKS
COURTROOMS	MOTION PICTURE THEATERS	SPECIAL AMUSEMENT
DANCE HALLS	MUSEUMS	*BUILDINGS
DAY CARE CENTERS (CHILDREN	NIGHT CLUBS	STABLES
AND ADULT)	NURSERY SCHOOLS	SUPERMARKETS
DENTISTS' OFFICES	NURSING HOMES	THEATERS
DEPARTMENT STORES	OUTPATIENT CLINICS	TRUCK & MARINE TERMINALS
DOCTORS' OFFICES	PARKING GARAGES	UNIVERSITIES
DORMITORIES	PASSENGER STATIONS &	WAREHOUSES
DRUG STORES	TERMINALS OF AIR,	

Additional duties imposed by the Connecticut General Statutes on local fire marshals are as follows.

- Work closely with your local building official during plans review and the construction of, addition to or renovation of buildings and facilities and the installation of life safety systems within your community to insure compliance with the provisions of Connecticut's fire safety regulations and codes.
- Investigate the origin, cause, and circumstance of all fires and explosions within their jurisdiction, and shall report the same to the State Fire Marshal in the designated format pursuant to CGS 29-302 and 29-303.
- Required to be certified by the State Fire Marshal which includes attend continuing education programs to keep abreast of the changing codes and regulations; and advances in new technology in the fire protection field to maintain a minimum ninety (90) hours of continuing education credit over a determined three year period pursuant to CGS 29-298.
- Provide safety tips, public education and give advice to the general public.
- Upon finding hazards in manufacturing premises, notify the appropriate state or federal agency having jurisdiction over



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occupational health and safety pursuant to CGS 29-307

- Enforce CGS 29-318b regulating the installation and use of space heaters in residential occupancies other than a single family residence.
- Inspect all flammable and combustible liquids storage tank installations, such as fuel dispensing stations, for compliance with Connecticut Flammable and Combustible Liquids regulations pursuant to CGS 29-320.
- Inspect and enforce the Connecticut Regulations concerning storage, use of Liquefied Petroleum Gas and Liquefied Natural Gas pursuant to CSG 29-331.
- Assist in the administration of the manufacturing employer hazardous materials notification law pursuant to CGS 29-307a.
- Annually inspect all storage plants and equipment at bulk storage plants for the storage and transportation of hazardous chemicals in accordance with the Connecticut Hazardous Chemical Code pursuant to CGS 29-337.
- Conduct site inspection of all fireworks and special effects displays for compliance with the Connecticut Fireworks and Special Effects Code and applicable State legislation. Also make the determination of the amount of fire protection and extinguishing equipment to be on site pursuant to CGS 29-357.
- Inspect and enforce the Connecticut requirements regarding the sale and use of sparklers and fountains pursuant to CGS 29-357.
- Provide an annual report to the local or regional school board of all inspections of school buildings pursuant to CGS 29-305(b).
- Issue permits for the use, transportation and storage of explosives in compliance with State Explosives Regulations pursuant to CGS 29-349.
 - *Investigate complaints concerning explosives.*
 - *Inspect explosive storage magazines.*
 - *Spot-check all job sites where explosives are being used.*
- Inspect regulated tents and portable structures for compliance with the Connecticut Tent and Portable Shelter Code pursuant to CGS 29-140.
- Upon receiving a complaint from the owner or occupant, inspect one and two family dwellings to assure the statutory requirements regarding smoke detection and warning equipment and carbon monoxide detection are satisfied based upon occupancy date pursuant to CGS 29-305(b).
- For new residential buildings other than private dwellings occupied by one or two families, either the Building Official or the Fire Marshal must certify that carbon monoxide detection and warning equipment was installed pursuant to CGS 29-292.
- Receive quarterly reports and monitor the installation of automatic sprinkler systems in existing nursing homes in accordance with CGS 29-315.
- Assist applicants, who wish to do so, with the filing of requests for variations or exemptions from a requirement of a code or regulation promulgated pursuant to CGS Chapter 541.



TOWN OF WARREN
50 Cemetery Road Warren CT 06754

Application for Employment

“We are an equal opportunity employment company. We are dedicated to a policy on non-discrimination in employment on any basis including race, creed, color, age, sex, religion, national origin, or physical defects”. The Town also provides “reasonable accommodations” to qualified individuals with disabilities, in accordance with Americans With Disabilities Act and applicable state and local laws.

**This form must be completed fully and signed for further consideration.
Resumes may be included but may not be substituted.**

(PLEASE PRINT)

Position(s) Applied For: _____ Date of Application _____

GENERAL INFORMATION

Name: _____ Social Security Number: _____
Last First Middle Initial

Address: _____
Street Apt/Unit City State Zip

Home Phone: _____ Cell Phone: _____ Email Address: _____

Referred by: _____

Are you currently employed? ☐ Yes ☐ No May we contact your present employer? ☐ Yes ☐ No

Are you available to work: ☐ Full Time ☐ Part Time ☐ Temporary ☐ Seasonal

Date available for work? _____

Are you currently authorized to work in the U.S.? ☐ Yes ☐ No

(Note: 1986 Immigration Reform & Control Act requires verification of identity and employment eligibility at the time of hire)

Have you filed an application for any other positions with the Town? If yes, please ☐ Yes ☐ No
list positions: _____

Were you, at any time, previously employed by the Town? If yes, indicate position ☐ Yes ☐ No
held and department: _____

Are you 18 years of age or older? (A work permit is required if you are under age 18) ☐ Yes ☐ No

Have you ever been convicted of any offense other than a minor traffic violation ☐ Yes ☐ No
or juvenile offenses? If yes, explain nature of offense, dates, where and disposition.
(Exclude any sealed or expunged convictions.) _____

(Note: Conviction is not necessarily disqualifying. The Town will consider the nature of the crime and its relationship to the job being applied for, information concerning rehabilitation and the amount of time elapsed since the conviction or release from custody.)

VETERAN AND MILITARY INFORMATION

Are you a Veteran of the US Armed Forces? ☐ Yes ☐ No
Branch _____ Date of Discharge: _____

EDUCATION

Circle # of Years Completed	Name & Location of School	Years Attended	Date Graduated	Subjects Studied/ Degree Awarded
High School 0 1 2 3 4 / GED				
College 1 2 3 4				
College 5 6 7 8				
Trade, Business or Correspondence School				

LICENSES AND/OR CERTIFICATIONS

Do you have a current Driver's License? ☐ Yes ☐ No If yes, issuing state _____

Do you have a current Commercial Driver's License? ☐ Yes ☐ No

If yes, issuing state _____ License Number _____

Do you have any professional licenses or certifications? ☐ Yes ☐ No If yes, please indicate:

License/Certification Type	State	Expiration Date	License/Certification Number
_____	_____	_____	_____
_____	_____	_____	_____

SKILLS AND QUALIFICATIONS

Do you have other training, internships, or armed forces training related to the job for which you are applying?

If yes, please indicate:

Training Name	Location	Dates Attended	Subject
_____	_____	_____	_____
_____	_____	_____	_____

REFERENCES

Name	Address/Phone	Business	Years Known

EMPLOYMENT HISTORY

List below all present and past employment. Begin with your most recent employment and work backwards consecutively. Resumes may be included only with a completed application. Please attach additional sheets, if necessary.

1. Position _____ Dates: From _____ to _____
Month/Year Month/Year
Name of Employer _____ Phone: _____
Address of Employer _____
Name of Supervisor _____ Supervisor's Phone _____
Reason for leaving: _____
Job Responsibilities: _____

May we contact for a reference? ☐ Yes ☐ No If no, please indicate reason _____

2. Position _____ Dates: From _____ to _____
Month/Year Month/Year
Name of Employer _____ Phone: _____
Address of Employer _____
Name of Supervisor _____ Supervisor's Phone _____
Reason for leaving: _____
Job Responsibilities: _____

May we contact for a reference? ☐ Yes ☐ No If no, please indicate reason _____

3. Position _____ Dates: From _____ to _____
Month/Year Month/Year
Name of Employer _____ Phone: _____
Address of Employer _____
Name of Supervisor _____ Supervisor's Phone _____
Reason for leaving: _____
Job Responsibilities: _____

May we contact for a reference? ☐ Yes ☐ No If no, please indicate reason _____

This application is not a contract of employment between the Town, and any person, nor does it give any person the right to continue in the employment of the Town for any specified period of time. In the absence of a Union Contract, Written Contract, a Public Policy Violation, and/or a Civil Rights Violation, employment may be terminated with or without cause or notice at any time, at either my option or that of the Town of Warren.

All employees are employed-at-will. No management representative has any authority to enter in agreement, either oral or written, for continuing employment for any specified period of time, or for any particular term or condition of employment except the Chief Elected Official of the Town of Warren, and only if such agreement is made in writing and signed by the Chief Elected Official of the Town of Warren, subject to approval by the Board of Selectmen. All employees are subject to a defined probationary period, which may, at the Town's discretion or by mutual agreement with a Union, if applicable, be extended. During the probationary period, employment may be terminated without notice at any time and for any reason.

In the processing of this employment application, I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education or any other information that they might have, personal or otherwise, with regard to any of the subjects covered by this application; and I release all such parties from all liability for any damage which may result from furnishing such information to you. I authorize you to request, receive and verify all information given in this application.

I understand that as a condition of my consideration for employment with the Town, I may be required to undergo a urinalysis drug test. I also understand that it is the Town's policy not to hire an applicant who receives a confirmed positive drug test result. The urinalysis will be performed by an authorized medical facility, which will interpret the drug test results. A positive result will be confirmed by a second test with the same sample. The results will be disclosed to the Chief Elected Official of the Town of Warren. I will be given a copy of any positive urinalysis drug test result. I have read and understand the above statement and voluntarily consent to undergo a urinalysis as a condition of my consideration for employment with the Town.

In the event that I am offered and accept employment with the Town, I will be asked to provide information certifying my employment eligibility in order to comply with requirements of the Immigration and Naturalization Service (INS). Employment is conditioned upon providing the required documentation in a timely manner.

I understand that this application will be active for a period of one year; after that time, if I wish to be considered for employment, I must submit a new application.

I certify that all statements made on or in connection with this application are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that incomplete, false, inaccurate, or misleading information given in my application, interview(s) or during the course of my employment may result in the rejection of this application; withdrawal of a job offer; or discipline, up to and including termination of employment. Further, false information provided whether willingly or accidental, may result in my immediate dismissal if employed, whenever the omission or falsehood is discovered.

Signature: _____

Date: _____

Date Received: _____