



**City of Columbus
Division of Fire
3675 Parsons Avenue**

Land Annexation Risk Summary

*This page is to be filled out by the applicant and emailed to:
ldpeck@columbus.gov, mrcaserta@columbus.gov, dwalton@columbus.gov &
yarnold@columbus.gov*

Please direct questions to Lt. Loren Peck: 614.221-3132 ext 2392

In the "Proposed Usage" column: Mark N/A or leave the question blank if the information is not known.

Location			
Area (size)	Current Zoning	Annexation No.	
Indicate the Population Density (People per Square Mile)		Current Usage <input type="checkbox"/> >1000 <input type="checkbox"/> 500-1000 <input type="checkbox"/> <500	Proposed Usage <input type="checkbox"/> >1000 <input type="checkbox"/> N/A <input type="checkbox"/> 500-1000 <input type="checkbox"/> <500
Does/Will the area/buildings comply with Section 2501.07 of the Columbus City Codes regarding Hydrants and Fire Flows? <small>For specific requirements call: 614.645.7641x5609</small>		Current Usage <input type="checkbox"/> Yes <input type="checkbox"/> No	Proposed Usage <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No
Does/Will the area/buildings comply with Section 2501.07 of the Columbus City Codes regarding Fire Vehicle Access? <small>For specific requirements call: 614.645.7641x5609</small>		Current Usage <input type="checkbox"/> Yes <input type="checkbox"/> No	Proposed Usage <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Indicate the total sq. ft. and the average sq. ft. for each of the following occupancy types in the area.		Current Usage	Proposed Usage
Industrial (Use Groups F & H)		/	/ <input type="checkbox"/> N/A
Commercial, Institutional, & Educational (Use Groups R1, A, B, E, I, M, S)		/	/ <input type="checkbox"/> N/A
Multi-Family (Use Groups R2, 3, & 4)		/	/ <input type="checkbox"/> N/A
Single Family, Two and Three Family		/	/ <input type="checkbox"/> N/A
Unimproved/Rural/Farmland		/	/ <input type="checkbox"/> N/A
Indicate if any of the following Special Risks are, or will be, located in the area.		Current Usage	Proposed Usage
Occupancies housing Hazardous Materials (Use Groups H)		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Airports/Heliports		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Bodies of Water (Ponds, Creeks, Lakes, etc.)		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Freeways (including on-ramps or off-ramps)		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Wildlands / Cliffs / Caves		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Information provided by:		Phone No.:	
I certify that the information above is correct to the best of my knowledge and		Email:	

that I am authorized to act as an agent for the organization requesting the annexation.

Land Annexation Risk/Service Evaluation

This page is to be filled out by Fire Division Personnel

Annexation No. _____

Emergency Medical Response and Residential and Commercial Fire Response	Unit Assigned	Special Operations	Staffing	Travel Distance (Mi.)	Response Time (min.)	Mutual Aid	Automatic Response
1 st ALS Medic						<input type="checkbox"/>	<input type="checkbox"/>
2 nd ALS Medic						<input type="checkbox"/>	<input type="checkbox"/>
1 st Engine						<input type="checkbox"/>	<input type="checkbox"/>
2 nd Engine						<input type="checkbox"/>	<input type="checkbox"/>
3 rd Engine						<input type="checkbox"/>	<input type="checkbox"/>
1 st Ladder						<input type="checkbox"/>	<input type="checkbox"/>
2 nd Ladder						<input type="checkbox"/>	<input type="checkbox"/>
1 st Heavy Rescue						<input type="checkbox"/>	<input type="checkbox"/>
2 nd Heavy Rescue						<input type="checkbox"/>	<input type="checkbox"/>
1 st Battalion Chief						<input type="checkbox"/>	<input type="checkbox"/>
2 nd Battalion Chief						<input type="checkbox"/>	<input type="checkbox"/>
EMS Supervisor						<input type="checkbox"/>	<input type="checkbox"/>
<i>Special Operations Key: 1=ALS, 2=Water Rescue Boat, 3=Extrication Equipment, 4=Aircraft Rescue and Fire-Fighting.</i>							
<i>Travel Distance: Is the actual route as measured from the responding unit's station to the mid-point of the area.</i>							
<i>Response Time: T=Dx2 (Time equals Distance Doubled)</i>							

Questions are based on NFPA 1710 Standard for the Organization and Deployment of Fire Suppression Operations, Emergency Medical Operations, and Special Operations to the Public By Career Fire Departments

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|---|-------------|--|
| 1. Does the first engine meet the standard for initial response time? | (4 minutes) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Does the first alarm residential assignment meet the standard for response time? | (8 minutes) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Does the first alarm commercial assignment meet the standard for response time? | (8 minutes) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Does the EMS assignment meet the standard for first responder time? | (4 minutes) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Does the EMS assignment meet the standard for ALS response time? | (8 minutes) | <input type="checkbox"/> Yes <input type="checkbox"/> No |

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|---|--|--|
| 6. Does the current usage in the area require the addition of special operations to the first engine? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. Does the proposed usage of the area require the addition of special operations to the first engine? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. Does the Fire Division have sufficient staff resources to provide services to the annexed area based on the current usage of the area? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. Does the Fire Division have sufficient staff resources to provide services to the annexed area based on the proposed usage of the area? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 10. List the number of additional personnel by rank, needed to provide services to the annexed area based on the current usage. | | |
| 11. List the number of additional personnel by rank, needed to provide services to the annexed area based on the proposed usage. | | |
| 12. List the amount and type of additional resources needed to provide services to the annexed area based on the current usage (e.g.: engine, ladder, rescue, medic, boat, etc.) | | |
| 13. List the amount and type of additional resources needed to provide services to the annexed area based on the proposed usage (e.g.: fire station, engine, ladder, rescue, medic, boat, etc.) | | |

Response Table and Questions 1-5 completed by:	Phone No.: 221-3132 ext 2392
Lt. Jeffrey J. Geitter	Email: jjgeitter@columbus.gov
Rank, Name, ID No., Date	Fax: 645-4766

Needs Assessment Questions 6-13 completed by:	Phone No.:
	Email:

Rank, Name, ID No., Date	Fax:
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