



## DRAFT COMMANDER RESERVATION FORM FAIRBANKS FIRE DEPARTMENT

- ✓ Please complete a form prior to each requested day of use to be calendared.
- ✓ Print and Fax reservation to: 907-450-6666 or Email to: [fire@fairbanks.us](mailto:fire@fairbanks.us)
- ✓ **Please specify PICK-UP TIME:** **DROP OFF TIME:**

**Requested date(s) of usage:**

### **IMPORTANT: DO NOT move Draft Commander with water in it at any time.**

- The Draft Commander is rented for 24 hours, from 0800-0800.
- The 24 hour rental fee is \$180 regardless of pick up time or if you have it for less than 24 hours.
- The Draft Commander is housed at Public Works - 2121 Peger Rd, Fairbanks, AK 99709
- The availability of the Draft Commander for pickup and return is Monday through Friday during normal business hours, 0800-1700.
- Single day reservations for pickup on Friday must be returned on Friday.
- Weekend reservations with a pickup on Friday will be billed for Friday and Saturday, but not Sunday. If the unit is returned on Monday morning by 0900 you will be charged for only two days. If it is returned after 0900, you will be charged for Monday as well.
- **Rental is limited to trained personnel.**
- We recommend you use a large enough vehicle for the weight of the trailer; ¾ ton minimum. The City of Fairbanks is not responsible for any damage to the tow vehicle your organization provides.
- Reservations will be calendared once we receive the completed form, and we will contact you to confirm the reservation.
- Please contact the on duty BC at 907-590-3718 for pick up and return of the Commander.
- At checkout FFD personnel will complete an inventory/inspection of the trailer. Another inventory/inspection will be completed when the trailer is returned.
- Damage to the trailer or equipment and any missing equipment will be noted during each inventory.
- You are financially responsible for any damages and will be billed for all repair costs and/or missing equipment.
- Please cancel reservations 48-hours prior to pick up. Telephone, email, or fax cancellations are acceptable.
- **My signature below indicates that I fully understand the above statements and I agree with the terms and conditions.**

### **BILLING INFORMATION:**

Organization:

Purpose:

Address:

City, State, & Zip:

Phone:

Fax:

Authorized Signature: \_\_\_\_\_

Printed Name/Title: