



State Fire Marshal – Training Division Patch Request Form



First Name: _____ Middle Initial: _____ Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Last 4 of SSN: _____ Date of Birth: _____

E-mail Address: _____

Current Fire Department/Organization: _____

Type of Patch: (Select all that you would like to request)

- | | |
|---|--|
| <input type="checkbox"/> Hazardous Materials Operations Level - \$1.50 ea | <input type="checkbox"/> Fire Officer I - \$1.50 ea |
| <input type="checkbox"/> Hazardous Materials Technician Level - \$1.50 ea | <input type="checkbox"/> Fire Officer II - \$1.50 ea |
| <input type="checkbox"/> Firefighter I - \$1.50 ea | <input type="checkbox"/> Instructor I - \$1.50 ea |
| <input type="checkbox"/> Firefighter II - \$1.50 ea | <input type="checkbox"/> Instructor II - \$1.50 ea |
| <input type="checkbox"/> ADO –Pumper - \$1.50 ea | <input type="checkbox"/> Nebraska Patch - \$4.00 ea |
| <input type="checkbox"/> ADO – Mobile Water Supply - \$1.50 ea | |

Total Owed:

Nebraska Certification #: _____ Nebraska Certification #: _____

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We must verify your certification information on the request form with our certification database records. If we are unable to verify a State of Nebraska certification; your request, fee and explanation will be returned to you.

Payment Method

Ensure that your payment is enclosed with the request form. Without payment, we will not be able to process your order. **We accept money order, checks and online payment.**

You can mail your patch request form and payment to:
State Fire Marshal – Training Division
3347 West Capital Avenue
Grand Island, NE 68803

Or you can e-mail this form if you have paid online to corina.kuta@nebraska.gov
Online Payment Website: <https://sfm.nebraska.gov/fees>

For Internal Use Only

Date Received: _____ Date Approved: _____ Date Mailed: _____