



Fire Department Personal Printer/Scanner Request Justification Form

Name:

Email:

Division:

Contact Number:

How many printer(s)/scanner(s) currently exist:

Please explain why existing printer(s)/scanner(s) are necessary in addition to centralized printing?
(Decisions are developed on a case-by-case basis). Leave blank if this question does not apply.

Please explain the need for a new printer(s)/scanner(s) in addition to centralized printing?
(Decisions are developed on a case-by-case basis). Leave blank if this question does not apply.

AFC/DFC/Manager Signature:

Revised 4/23/2024

PWB