

Tri-Com Central Dispatch Board-Up Service Policy 2018

The St. Charles, Geneva, Batavia, Elburn, North Aurora, and Sugar Grove Fire Departments (Tri-Com Central Dispatch), as a service to our residents, maintain an annual registry list of board-up companies to assist property owners in selecting a company following a fire or other emergency. In instances where property owners do not have a preference, Tri-Com will contact, on a rotating basis, registered companies who have completed the application packet and meet the criteria set forth below. Tri-Com Central Dispatch and its member agencies do not endorse any of the companies on the list. In order to be on the list of companies, the following requirements must be agreed upon.

Your initials after each requirement below acknowledges that you have read, understand, and agree to abide by each statement.

1.	. Complete a registration packet annually. The packets must include contact information, a signed copy this form, and the required documentation listed below. Initial:	of		
2.	. Maintain comprehensive general liability in the sum of \$1,000,000, statutory minimum workmen's compensation, and automobile insurance and provide documentation with the annual registration packet *A copy must be included with the application packet. Initial:	et.		
	Treopy must be meraded with the application packet.			
3.	Maintain written evidence of criminal background checks completed by an approved third-party entity within the last twelve month period for each employee working. Reports must be made available to police and fire personnel upon request. No employee who has any felony conviction, a misdemeanor conviction relating to theft, larceny, fraud, deceptive practice, or similar related offense may provide services on a project. If an owner, principal, or employee is found to not have a current background check on file or an unsatisfactory background check report – the company will be removed from the referral list and will be liable for any associated losses. *A statement of completion listing each individual, by name, that has been cleared must be submitted with the application packet. Initial:			
4.	All vehicles must be marked with the company name and/or logo. All employees will present a company ID with photo and a state issued driver's license or photo ID to the on-scene incident commander. Initial:			
5.	NO company will be allowed on fire or disaster scene unless it has been requested by the building owner or contacted by Tri-Com on behalf of a fire department. Companies found "chasing" fires will be removed from the referral program. Initial:			
5.	Board-up companies must have the ability to provide associated services upon request including winterization. Initial:			



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7.	-	e representatives must arrive on-scene within 60 minuted and approved at the time of the initial contact.	es of being contacted unless a longe Initial:		
8.	<u> </u>	by not be subcontracted out to another company. If you are unable to respond when contacted, ast be notified and the next company on the list will be contacted. Initial:			
9.	Board-up companies participating in the referral program shall hold Tri-Com Central Dispatch, the member cities, member fire departments, member police departments, and all employees and officials of the foregoing harmless and indemnified against any denied claims, costs, wages, charges, materials incurred by the company in providing services to a project referred by Tri-Com Central Dispatch. A company's inclusion on the rotating list does not constitute a contract between the company and Tri-Com Central Dispatch or any member agency of Tri-Com Central Dispatch. Initial:				
10.	• •	oard-up companies and their employees may not represent themselves as being endorsed in any way by ri-Com Central Dispatch or any member agency of Tri-Com Central Dispatch. Initial:			
11.	Failure to meet any of the above requirements as stated may result in the termination of referral services and a suspension of at least one (1) full year before any reinstatement will be considered. Initial:				
Compa	any Name:				
Addres	ss:				
Agent	Name:				
Phone:	:	Email:			
Signature:			Date:		
Phone	Number for Servi	ce Calls:			