



Alcohol and  
Gambling  
Enforcement

Bureau of  
Criminal  
Apprehension

Driver  
and Vehicle  
Services

Emergency  
Communication  
Networks

Homeland  
Security and  
Emergency  
Management

Minnesota  
State Patrol

Office of  
Communications

Office of  
Justice Programs

Office of  
Pipeline Safety

Office of  
Traffic Safety

State Fire  
Marshal



## State Fire Marshal

445 Minnesota Street • Suite 145 • Saint Paul, Minnesota 55101-5145

Phone: 651-201-7200 • Fax: 651-215-0525

[www.dps.state.mn.us](http://www.dps.state.mn.us)

Date: November 27, 2018

Name: Shawn Krizaj

Address: Duluth FD

602 West 2<sup>nd</sup> Street

Duluth, MN 55802

RE: Gear Washer/Extractor/Dryer Award

The Minnesota Department of Public Safety, through the State Fire Marshal Division, is pleased to notify you that your fire department has been awarded the amount of **\$6,473.50** from the Turnout Gear Washer/Extractor/Dryer Award program with a local match requirement of **\$6,473.50**. This reimbursement award is for the purchase and installation of a gear washer/extractor as proposed in your project proposal. Your department will need to purchase, install and have the project completed between July 1, 2018 and June 30, 2019. If there is a change to the type of gear washer/extractor purchased, prior authorization must be received from the State Fire Marshal division.

In order to process your reimbursement award you must:

1. Complete and sign the enclosed Request for Reimbursement Form by August 1, 2019. Your fire department is encouraged to send in your Request for Reimbursement Form anytime during the July 1, 2018-June 30, 2019 fiscal year.
2. Attach documentation of funds paid. Documentation includes: paid invoices for purchase, delivery and installation of approved gear washer/extractor/dryer.
3. Mail, fax or email the Request for Reimbursement Form and supporting documentation.

The funds will be disbursed upon receipt of the signed, completed form, along with the proper supporting documentation. You will not receive a check in the mail, your reimbursement will be electronically deposited into the account that corresponds to the tax identification number provided on the Request for Reimbursement Form.

If you have questions regarding your award, please email me at [nolan.pasell@state.mn.us](mailto:nolan.pasell@state.mn.us) or you may call me at (651) 201-7218.

Sincerely,

Nolan Pasell  
Special Projects Coordinator





State Fire Marshal

445 Minnesota Street • Suite 145 • Saint Paul, Minnesota 55101-5145
Phone: 651-201-7200 • Fax: 651-215-0525
www.dps.state.mn.us

Gear Washer/Extractor/Dryer Request for Reimbursement Form

- Alcohol and Gambling Enforcement
Bureau of Criminal Apprehension
Driver and Vehicle Services
Emergency Communication Networks
Homeland Security and Emergency Management
Minnesota State Patrol
Office of Communications
Office of Justice Programs
Office of Pipeline Safety
Office of Traffic Safety
State Fire Marshal

Name: Shawn Krizaj
Fire Department: Duluth FD
Street Address: 602 West 2nd Street
City, State, Zip: Duluth, MN 55802
Award amount: \$6,473.50
Required Match: \$6,473.50

Fire Departments must complete and return this form to receive the reimbursement award:

I certify that the items for which this reimbursement request is made in the amount of \$\_\_\_\_\_ has been paid for by the municipality on behalf of the\_\_\_\_\_. There were no federal grant or other grant dollars used to pay for the purchase or installation of the gear washer/extractor/dryer.

Remember to include:

- Copies of invoices
Please confirm your Federal Tax ID number is correct (if not shown, please provide)

Your Fire Department's Request for Reimbursement Form(s) and copies of all invoices must be submitted by August 1, 2019.

Federal Tax Identification Number: 41-6005105

State Vendor Number: 197681

Signature of Municipality Finance Director/Clerk/Treasurer: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_ Contact phone # \_\_\_\_\_

Send request to: State Fire Marshal Division, Attn: Nolan Pasell, 445 Minnesota Street, Suite 145, Saint Paul, MN 55101 or via e-mail at Nolan.pasell@state.mn.us

To be completed by Minnesota Department of Public Safety, State Fire Marshal Division:

State Fire Marshal Signature: \_\_\_\_\_

Award Amount paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_

