

Minnesota Department of Labor and Industry  
 Construction Codes and Licensing  
 Code Services  
 443 Lafayette Road North  
 St. Paul, MN 55155  
 Phone: (651) 284-5068 Fax: (651) 284-5749  
 http://www.dli.mn.gov/



## Disaster Assistance Volunteer Form

PRINT IN INK or TYPE your responses.

The purpose of this form is to expedite volunteer inspection assistance available following a disaster. NOTE: Submittal of this document does not obligate anyone to participate if contacted.

**THE INDIVIDUALS LISTED BELOW HAVE BEEN AUTHORIZED TO REPRESENT: NAME OF ORGANIZATION/COMPANY**

\_\_\_\_\_  
 ORGANIZATION/COMPANY MAIN PHONE

\_\_\_\_\_  
 ADDRESS

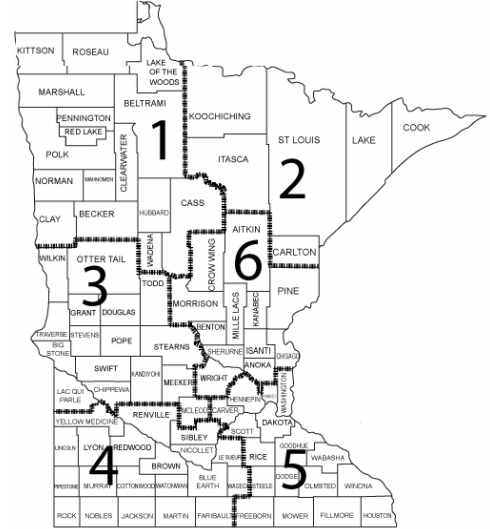
\_\_\_\_\_  
 CITY STATE ZIP CODE

\_\_\_\_\_  
 SUBMITTED BY (PRINT NAME AND TITLE)

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 PHONE

\_\_\_\_\_  
 E-MAIL



The organization/company is responsible for notifying each individual included on this list and providing appropriate information regarding their organization authorization policies and procedures. Please include this information in your Disaster Plan. Remember – the best way to prepare and train for a disaster is to assist with the aftermath of a disaster in another municipality.

NAME and EMAIL ADDRESS PRINT CLEARLY	PHONE WORK	PHONE HOME (optional)	PHONE MOBILE	AVAILABLE FOR THESE REGIONS (SEE MAP):	BUILDING OFFICIAL NO.	ELECT	PLUMB	HVAC	BLDG	CLERICAL
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Mail to: Department of Labor and Industry, Construction Codes and Licensing, Code Services, 443 Lafayette Road N., St. Paul, MN 55155.**

**This document can be made available in Braille, large print or audio by calling 1-800-342-5354.**