



**FIRE DEPARTMENT**  
9 METROTECH CENTER BROOKLYN, NY 11201-3857



**Date:** \_\_\_\_\_

**SSN:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Please note that I, \_\_\_\_\_ hereby surrender my current COF #  
\_\_\_\_\_ as I no longer work as an FSD/EAP at the following location:

\_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Signature:** \_\_\_\_\_