## **Personal Communication Record Form**

| Ms. Yassaman Sarvian, Jacobs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Client: Sites F | Reservoir Authority           |                 |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------|-----------------|--|
| Date: 12/8/2020                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Project Name    | Project Name: Sites Reservoir |                 |  |
| Time: 8:30 am                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Billing Numb    | er: 00537.20                  |                 |  |
| First and Last Name: Kenny Cohen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |                               |                 |  |
| Job Title: Fire Chief                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |                               |                 |  |
| Agency/Firm: Maxwell Fire Protection District                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 |                               |                 |  |
| Phone Number: (530) 438-2320                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Email: N/A      |                               |                 |  |
| ✓ Telephone Conversation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                               |                 |  |
| I ☐ He ☐                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | She             | <b>▼</b> Called               | ☐ Returned Call |  |
| ☐ Email ☐                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Fax             | Letter                        |                 |  |
| ☐ Memorandum ☐                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Meeting         | ☐ [Enter Type]                |                 |  |
| <ul> <li>Cited Information: Ms. Sarvian called requesting response times and staff numbers for the fire department. Mr. Cohen provided the following information:         <ul> <li>Staff includes volunteers and paid position, with three full time fire men and 31 volunteers. Firemen and EMTs are on staff. The District is a year-round, 24/7 fire district.</li> <li>Fire Protection District coverage is 17 square miles from County Line Road between Glenn and Colusa Counties to Lurline Road, south of Maxwell.</li> </ul> </li> </ul> |                 |                               |                 |  |
| <ul> <li>Local area response times are under five minutes (in town) and eight minutes (out of town).</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                               |                 |  |