



The Mission of the FASNY Museum of Firefighting is to educate a diverse audience about firefighting as history, as culture, as a service to humanity, as a preventative practice and as ever-changing art and technology.

Prospective Donor Questionnaire

Please note: Banner and patch donations may be accepted by a Museum staff member immediately. All other decisions concerning artifact donations are made after careful consideration. Considered factors include but are not limited to: condition, redundancy, and ability of the Museum to care for the object for the rest of its existence. As such, it is **not** guaranteed that your donation will be accepted.

Please mail this completed form with photographs to:
FASNY Museum of Firefighting
117 Harry Howard Avenue
Hudson, NY 12534

Please answer any and all questions that you are able to and provide photographs of the object. This information will assist us in making an informed decision on the proposed donation. It also helps us to fully document artifacts in our collection and to use them in our interpretive programs and exhibits.

Donor's Contact Information:

Donor Name: _____ Donor Phone #: _____

Donor Email Address: _____

Donor Home Address: _____

Object Information: (See below for apparatus donations)

Object: _____

Please describe object: _____

Please describe object's condition: _____

Dimensions of the Object: _____

Are there any documents (photos, letters, bill of sale, newspaper articles etc.) that you would like to include in the donation, or allow the museum to copy? _____

How long have you owned this object? _____

How did you acquire it? Purchase___ Inheritance___ Gift ___ Found___ Other _____

Please note: For the following series of questions, only list information that can be documented. Do not list hearsay or opinion.

Previous Owners: _____

Year made: _____

Where was the artifact manufactured? _____

When was it used? _____

Where was it used? _____

How was it used? _____

Historical Significance as it Relates to the Museum's Mission: _____

Apparatus Information: (Must be completed for all possible apparatus donations)

Make and Model: _____

Fire Department(s) Served: _____

Mileage: _____

Did you perform any repairs, additions, or other changes to object while it was in your care? Y___ N___

If yes explain: _____

Dimensions of the Object: _____

Are there any documents (photos, letters, bill of sale, newspaper articles etc.) that you would like to include in the donation, or allow the museum to copy? _____

How long have you owned this object? _____

How did you acquire it? Purchase___ Inheritance___ Gift ___ Found___ Other _____

Please note: For the following series of questions, only list information that can be documented. Do not list hearsay or opinion.

Previous Owners: _____

Year made: _____

Where was the artifact manufactured? _____

When was it used? _____

Where was it used? _____

How was it used? _____

Historical Significance as it Relates to the Museum's Mission: _____

CATEGORY	Excellent, good, fair, poor	Note if not period or original
General Appearance		
Paint Condition		
Lettering & Décor		
Cab Interior		
Warning Devices		
Controls		
Engine Appearance		
Hose Bed Appearance		
Hand Tools & Fittings		
Running Boards & Mats		
Rust (list specific areas)		

Any other history, information, or comments? (If you run out of room, please attach additional pages)

***Please note that a series of photographs showing different views of the object must accompany this questionnaire for the object to be considered. If you wish to submit digital photos, please contact the Museum's Assistant Curator at 518-822-1875.**