

Application Procedures
Compensation for Death of Full-Time Firefighter Killed in the Line of Duty

Tenn. Code Ann. § 7-51-206 authorizes a payment of twenty-five thousand dollars (\$25,000) to the estate of any regular or full-time firefighter killed in the line of duty.

To be eligible for compensation, each of the following criteria must be met:

1. The deceased firefighter must have been a regular or full-time employee of a fire department that is registered and recognized by the State Fire Marshal's Office as defined in Tenn. Code Ann. § 68-102-302;
2. The deceased firefighter must have been required to extinguish and control fires or fire-related incidents pursuant to Tenn. Code Ann. § 7-51-206; and
3. The deceased firefighter's death must have occurred in the course of employment and in the actual discharge of the duties of the position of firefighter.

To receive compensation conferred by this statute, the executor, administrator or other appropriate representative of the estate of a firefighter who was killed in the line of duty must apply to the Commissioner of the Department of Commerce and Insurance.

An application for compensation shall include all of the following documentation:

1. A cover letter from the applicant requesting the payment;
2. Proof that the applicant is authorized to act on behalf of the deceased firefighter's estate (e.g., letters testamentary or letters of administration);
3. A notarized and signed affidavit from the deceased firefighter's employer or fire suppression unit containing the following:
 - (a) Confirmation of the deceased's employment status as a regular or full-time firefighter required to extinguish and control fires or fire-related incidents pursuant to Tenn. Code Ann. § 7-51-206;
 - (b) Name of the fire department or unit;
 - (c) Date of death; and
 - (d) A statement from the deceased firefighter's employer that the decedent's death occurred "in the line of duty" as defined in Tenn. Code Ann. § 7-51-206(a)(2).
4. A true copy of the deceased firefighter's death certificate, or in the Commissioner's or designee's discretion, a copy of a true copy.

Please submit the application, affidavit, and required documentation to:

Commissioner of Commerce & Insurance
ATTN: Robert Wright, Chief of Fiscal Services
Department of Commerce & Insurance
Davy Crockett Building, 11th Floor
500 James Robertson Parkway
Nashville, Tennessee 37243

Questions concerning applications or payments should be directed to the Department's Chief of Fiscal Services, Robert Lee Wright at (615) 532-0521 or Robert.Lee.Wright@tn.gov.