Southgate Fire Department

14730 Reaume Parkway

Southgate, MI 48195

(734) 258-3080 / Fax (734) 246-1352

The City of Southgate is now recruiting for the position of Firefighter.

Applicants must meet the minimum requirements and

complete the application and selection process.

No Residency Requirements.

There are ***MUTIPLE BUDGETED POSITIONS OPEN***.

3 current open positions in 2026

With the anticipation of 5 more openings in 2027

About Southgate

Southgate is a downriver community that is 6.85 square miles with just over 30,000 residents. We operate out of 1 station, provide ALS first response, and fire protection. We **DO NOT TRANSPORT**, Rapid Response EMS is our current ambulance transport provider. In 2025 the department responded to 4912 calls for service. We operate a Box Alarm dispatching system which provides first alarm fire response to over 130000 residents. We are part of the Downriver Mutual Aid, which staffs multiple teams such as Haz-Mat Team, Fire Investigation Team, Logistics Team, Dive Team, and Downriver SWAT Medics. We operate a 2 unit system with 2 Captain's, 4 Lt's, 6 Sgt/Eng's, and 14 Firefighters. The City has **NEVER** laid off FF's, in fact we added FF's to the ranks.

Minimum Requirements 2026

- Applicants must be a citizen of the United States.
- High School Diploma or GED required.
- Valid Driver's license required.
- Applicant must have a valid CPAT or obtain one prior to hire date.
- Applicant must have Fire I & II certification-or be a licensed Paramedic willing to attend Fire School.
- Applications will be accepted if the applicant is in their final stages of Paramedic school.
- Applications will be accepted if the applicant has a valid MI Paramedic license.

- Proof of above requirements must be submitted with application.
- Lateral Pay is available, for up to 3 years full time IAFF experience.
- Currently under a 4 year contract expiring 06/30/2026.

Summary of Compensation and Benefits

1. Salary:

Base Wage-	Starting-	$63,551
	Year 1-	$66,950
	Year 2-	$72,100
	Year 3-	$77,250
	Year 4-	$86,005
	Sgt/Eng-	$91,670

2. Insurance
   - Medical Insurance:

     Blue Care Network

     We offer an opt out incentive pay of:

Single person:	$4000.00 per year
Married couple:	$6000.00 per year
Family plan:	$8000.00 per year.

   - Dental Insurance

     80/20% with $2000 annual

     $3000 lifetime orthodontic benefit per eligible dependent.

   - Optical Insurance:

     Blue Cross Blue Shield Optical Plus plan 80/20%

   - Life Insurance:

     City provides a $25000 term life insurance policy.

3. Pension:
   - Act 345 **Defined Benefit Pension** Plan- **2.69**% multiplier

- Act 345 is a dedicated mileage to fund the pension
- Employees pay 8.5% of pay into the pension
- Retiree Health Savings Account-city pays 2% of pay, employees pay 2%

4. Paid time off
    - After 1 year of service-16 PTO days per year
    - Seniority Vacation days earned after 10 years
5. Sick time:
    - Accrue 7 days per year- unlimited accrual
    - Employees that use less than 120 hours per year are credited with 72 hours of Bonus Vacation time per year.
6. Personal Business:
    - **144 hours** of PB time off per year-can be used in 4 hour increments
7. Trade time:
    - Unlimited trade time
8. Bonuses:
    - Uniform Bonus- $850 per year
    - Food allowance- $1125 per year
    - FLSA Bonus
9. Work Week
    - 50.4 hours per week
    - 13 Super Kelly's per year
    - Work 24, off 24, work 24 off 72, every 28 days extra day off

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Please Print

Position Applied for: **Entry Level Probationary Firefighter/Paramedic**

1. Name:_____
   Last First Middle
2. Address:_____
3. Last Previous Address:_____
4. Height:_____Weight:_____Eyesight:_____
5. Are you at least 18 years of age? _____
6. Are you a citizen of the United States? _____
7. If foreign born, date of first papers: _____ Date Naturalized: _____
8. Last four digits of social security # _____ Telephone No. _____
9. Driver's License No._____
10. Name of nearest relative: _____
11. Relation to you: _____
12. Address of relative:_____
13. Have you ever applied for a position in a Police or Fire Department before?_____
14. Have you ever had any police or fire experience?_____When? _____
15. Where?_____
16. What safety training have you had?_____
17. Date of Certification as State of Michigan Paramedic license. _____

18. Were you ever convicted of?

(a) A criminal offense?_____What charge? _____When? _____

(b) Non-criminal offense?_____What charge? _____When? _____

(c) A traffic offense?_____What charge? _____When? _____

23. Have you ever served a prison term?_____

EDUCATION

School Name, Location No. of Years Did You Graduate?

_____

High School or G.E.D.

_____

College or University

_____

Special Courses taken DEGREES CERTIFICATES AWARDED

_____

_____

MILITARY EXPERIENCE

Branch of Service:_____

Length of Service, from_____to_____Rank:_____

Type of Discharge:_____Present Draft Classification:_____

REFERENCES

Give at least three personal references:

Name	Address	Business	Years Known

EMPLOYMENT

List all positions held in the last 10 years

Present or Last Employer

Name of Employer:_____ Type of Business:_____

Address:_____ Date Employed, from _____ to_____

Name of Supervisor:_____

Description of work:_____

Previous Employer

Name of Employer:_____ Type of Business:_____

Address:_____ Date Employed, from _____ to_____

Name of Supervisor:_____

Description of work:_____

Previous Employer

Name of Employer:_____ Type of Business:_____

Address:_____ Date Employed, from _____ to_____

Name of Supervisor:_____

Description of work:_____

Previous Employer

Name of Employer:_____ Type of Business:_____

Address:_____ Date Employed, from _____ to_____

Name of Supervisor:_____

Description of work:_____

Attach additional sheet if necessary.

AFFIDAVIT OF APPLICATION

On this day said applicant personally appeared before me and having duly sworn before me that the printed and written parts of this foregoing application are, to the best of applicant's knowledge, information and belief, true in all respects, and the signature thereto affixed is genuine.

1. I agree and understand that any employment offer is conditional upon the results of the pre-employment medical examination.

2. Michigan law requires employers to make accommodations to handicapped applicants and employees where the accommodation does not impose an undue hardship on the employer. Handicapped employees and applicants may request an accommodation of their handicap by notifying the City in writing of the need for accommodation within 182 days of the date the handicapper knows or should know that an accommodation is needed. Failure to properly notify the City will preclude any claim that the employer failed to accommodate the handicapper.

3. I agree that any lawsuit against the City arising out of my employment or termination of employment, including but not limited to claims arising under State or Federal civil rights statutes, must be brought within one year of the event giving rise to the claims or be forever barred. I waive any limitation periods to the contrary.

Signature of Applicant _____

Sworn to and subscribed before me by said applicant this

_____ Day of _____, 20_____

_____
Notary Public

My Commission Expires:_____

Be prepared to submit the following information and documents:

1. Driver's License or Operator's License.
2. Emergency Medical Technician Paramedic license and ACLS certificate.
3. MFFTC Fire I and II Certificates
4. MFFTC Hazardous Awareness and Operation certification.
5. Current CPAT certificate.