BOISE CITY FIRE DEPARTMENT

RECORDS REQUEST FORM

Name: _____

Company / Department: _____

Address: _____

Phone: (____) _____ **Fax:** (____) _____

Email: _____

Please indicate type of information requested and be specific:

_____ **Incident Report** _____

(Date, Location, Incident #) _____

_____

_____

_____ **Fire Investigation Report** _____

(Date, Location, Incident #, Investigator) _____

_____

_____

_____ **Environmental Requests** _____

(Location of Storage Tanks, _____

Hazardous Materials) _____

_____

_____ **Other** _____

(Please Specify) _____

_____

Request Received By: _____ Date / Time: _____

Boise City Fire Department 333 N. Mark Stall Place Boise, Idaho 83704
Phone: 208.570.6500 **Fax:** 208.570.6586