

PRINCE WILLIAM COUNTY DEPARTMENT OF FIRE AND RESCUE

OFFICE OF THE FIRE MARSHAL

Date:

Dear Fire Marshal Office:

In accordance with the Virginia Freedom of Information Act (§ 2.2 -3700 et seq.) I am requesting copies of any records related to:

Date:

Time:

:

Address:

Incident Description:

Information Requested:

The type of document(s)/report(s) that I am requesting is/are:

FOIA TYPE	COST	QUANTITY	TOTAL
Fire Incident Report			
Photos			
Fire Marshal Report for cause and origin (if applicable)			
Due Diligence (Fire Code Violations – cost is per address)			
Environmental Assessments (Hazardous Materials, Incident Reports, All tank inquiries, etc.)			
Other (unspecified Fire Marshal related request per item)			
	TOTAL		

*All fees are paid upon receipt unless the information is directly related to the requestor and then ALL fees will be waived.

I would also like to request that all charges for supplying the records I have requested be estimated in advance. I understand that if you determine that the charges are likely to exceed \$200, I am obliged to pay that amount before you continue to process my request.

If you have any questions or require additional information in order to process my request, please do not hesitate to contact me at:

First Name:Last Name:Company (if applicable):Address:Address:Phone Number:Email:Email:

Signature: