



MAPLEWOOD FIRE DEPARTMENT

ATTN: Fire Records
1530 County Road C East, Maplewood, MN 55109
Office: 651-249-2800
fdrecords@maplewoodmn.gov



Fire Incident Report Request Form

SECTION A **CUSTOMER INFORMATION**

Name _____

Address _____

State _____ Zip Code _____

E-mail Address _____

Telephone Number _____ Signature _____

OFFICE USE ONLY
Date Received: _____
Incident No: _____
Accepted By (Initials): _____

Note : Please make sure you complete this form and attach any required documents.

SECTION B **REQUEST FIRE INCIDENT REPORT**

House No _____ Street Name _____ Apt(s) _____

(Note: If you are requesting Section C, do not fill out the remaining section below)

INCIDENT DATE ____/____/____ INCIDENT REPORT NO. (If available) _____

Please check the incident type below (choose only one box):

- Building
- Transportation - Type: _____ Make: _____ Plate: _____
- Outdoors (provide description) - _____
- Non-Fire Emergency (provide description) - _____

SECTION C **REQUEST PROPERTY REPORT**

Please indicate the period to be searched:

From: ____/____/____

To: ____/____/____

Note : We will only provide reports for the incidents found for the time period requested.