

NORTHERN ARIZONA CONSOLIDATED FIRE DISTRICT 2470 E. BUTLER KINGMAN, AZ 86409 (928) 757-3151

REQUEST FOR FIRE INCIDENT / INVESTIGATION REPORT

Requestor ³	's Name:		
Owner of the Property's Name:			
Fire Addre	ess:		
Date of Re	esponse:		
 ALL MAK INCO IF YO	REPORTS HAVE A 24-48 TE CHECKS PAYABLE TO OMPLETION OF THE INFO	E (Cash & Check are accepted) HOUR WAITING PERIOD : Northern Arizona Fire District DRMATION ABOVE MAY INCREASE WAITING PERIODS ERTY OWNER A WRITTEN AUTHORIZATION FROM THE O	OWNER MAY
AUTHORIZ	ATION		
	☐ Property Owner	☐ Power of Attorney	
	☐ Insurance Agent	☐ Written Authorization from Property Owner	
	☐ Law Enforcement	Other (specify)	
HOW WOU		one #:	
	☐ Email – Email Address:		
	☐ Mailed – Address:		
ADMINISTI		Completed Date:	
☐ Fee Paid	Date:	Completed Date:	