

**SCHAUMBURG FIRE DEPARTMENT
REQUEST FOR FIRE INCIDENT REPORT**

Date of Incident: _____ **Time of Incident:** _____ **Incident #** _____

Location of Incident:

Name & Address of Individual Requesting copy of Fire Incident Report

1. Do you live at the incident location? Yes No
 (If you answered "yes" you must supply a photo ID)
2. Are you the owner? Yes No
 (If you answered "yes" you must supply a photo ID)
3. Are you an Insurance Representative/Property Manager? Yes No
 (circle one)
 (If you answered "yes" you must supply a business card or ID)

I verify that the information I have indicated on this form to be correct.

Signature

Date

If you are not the owner, occupant, Insurance Representative or Property Manager for the above mentioned incident location, a Freedom of Information Act Request form must be completed, which will then be submitted to our Legal Department for their review before a copy of this report can be released.